	DEPARTMEN	ED STATES T OF THE INTERIOR AND MANAGEMENT		Mesic	Exp	FORM APPROVED OMB No. 1004-0135 pires November 30, 200	✓ ∞
•	SUNDRY NOTICES A Do not use this form for p bandoned well. Use Form	•	re-enter an		5. Lease Senal No. NM 045275 6. If Indian, Allottee of N/A 7. If Unit or CA/Agree	or Tribe Name eement, Name and/	for No.
	JBMIT IN TRIPLICATE - O	than Instructions on you	A A			,	
. Type of Well	Gas Well	Other	Majection 20	200	Nell Name and N		
. Name of Operator			$\neg \neg \qquad p_{f \cap r_{int}}$	ь —	9, API Well No.	KILDLIVAL	7F-Y
Yates Petroleum Co	orporation		OCD - ART	ESIA	30-015-26735	,	
a Address 105 S. 4th Street - A		3b. Phone No. (include 505-748-1471	e area cope)	. c. (1)	10. Field and Pool, o	or Exploratory Area	
	c., T.,R., M., or Survey Descrip			707 70	SOUTH DAG(11. County or Parish		J/PENN
JNIT A 660' FNL 660	FEL SECTION 26	-T20S-R24E					
42 OUEOK ADDI	DODDIATE BOY/ES) TO III	NDICATE NATURE OF	NOTICE REPORT OF	OTHER DAT	EDDY COUN	ry, NM	
YPE OF SUBMISSION	ROPRIATE BOX(ES) TO II	NUICATE NATURE OF	TYPE OF ACTI		<u> </u>		
Notice of Intent	Acidize	Deepen	Production (Start/Resu	ime)	Water Shut-Off		
Subsequent Report	Alter Casing	Fracture Treat	Reclamation		Well Integrity		
Final Abandonment Notice	Casing Repair	New Construction	Recomplete		Other		
	Change Plans	Plug and Abandon	X Temporarily Abandon	•			
	Convert to Injection	Plug Back	Water Disposal				
or provide the Bond No. on file with completion or recompletion in a ne reclamation, have been completed PLEASE NOTE: SUNDRY A NOTICE OF INTENT. P	ntally, give subsurface locations and h BLWBIA. Required subsequent rew interval, a Form 3160-4 shall be d, and the operator has determined of NOTICE DATED 1-30-02 RESSURE TEST WAS NE	measured and true vertical depi eports shall be filed within 30 day filed once testing has been com that the site is ready for final insp WAS INADVERTANTOL	ths of all pertinent markers and z ys following completion of the inv pleted. Final Abandonment Noti- pecition.) Y SENT IN AS A SUBSE	cones. Attach the rolved operations ces shall be filed	a Bond under which the value of the operations result only after all requirement PORT TO T/A. IT	work will be performed Its in a multiple ints, including SHOULD HAVE I	i
SORRY FOR THE INCOM DONNA CLACK	IVENIENCE.						9 000
I herebycertify that the foregoing i	is true and correct		1 ′			TOTAL CHARLEST TOTAL CONTRACTOR TO THE CONTRACTO	

Approved by

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant to conduct operations thereon.

Title

Office

OFFIC

11-26-02

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Regulatory Compliance Technician

Title 18U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

Name (Printed/Typed)

Donna Clack
Signature

