Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Departme..

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

JUN 1 1 1991

O. C. D.
ARTESIA OFFICE

WELL API NO.
30- 015-26605

5. Indicate Type of Lease

STATE ☐   FEE ☒

6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"
(FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name

1. Type of Well:
OIL
WELL ☒   GAS
WELL ☐   OTHER

Pincushion "AHN"

2. Name of Operator
Yates Petroleum Corporation

8. Well No.
2

3. Address of Operator
105 South Fourth Street, Artesia, NM 88210

9. Pool name or Wildcat
N. Dagger Draw Upper Penn

4. Well Location

Unit Letter __0__ : __660__ Feet From The __South__ Line and __1980__ Feet From The __East__ Line

Section __25__ Township __19 South__ Range __24 East__ NMPM __Eddy__ County

10. Elevation *(Show whether DF, RKB, RT, GR, etc.)*
3590

11.   Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐   PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐   CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ___Extend APD___ ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐   ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐   PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER:_____ ☐

12. Describe Proposed or Completed Operations *(Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work)* SEE RULE 1103.

Please extend APD approval for another six months.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE _____   TITLE __Landman__   DATE __6-10-91__

TYPE OR PRINT NAME Ken Beardemphl

TELEPHONE NO. 748-1471

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

APPROVED BY_____ TITLE _____ DATE _____

JUN 1 4 1991

CONDITIONS OF APPROVAL, IF ANY: