

Submit 3 Copies To Appropriate District State of New M	
District   Energy, Minerals and Nat	
1625 N. French Dr., Hobbs, NM 87240 District II	WELL API NO. 30-015-28404
811 South First, Artesia, NM 87210 OIL CONSERVATION	5 Indicate Type of Lease
District III 2040 South Pac 1000 Rio Brazos Rd., Aztec, NM 87410	heco STATE FEE S
District IV Santa Fe, NM 87410	7505 6. State Oil & Gas Lease No.
2040 South Pacheco, Santa Fe, NM 87505	
SUNDRY NOTICES AND REPORTS ON WELL	7. Lease Name or Unit Agreement Name:
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PI	JUG BACK TO A
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) F PROPOSALS.)	OR SUCH
1. Type of Well:	
Oil Well  Gas Well  Other	Rodke ADY Com.
2. Name of Operator	8. Well No.
Yates Petroleum Corporation	1
3. Address of Operator	9. Pool name or Wildcat
105 South Fourth Street, Artesia, New Mexico 88210 Dagger Draw Upper Penn North	
4. Well Location	
Unit Letter A: 660 feet from the North line and 660' feet from the East line	
Unit Letter A: 660 feet from the North line and 660 feet from the East line	
Section 21 Township 19S R	ange 25E NMPM Eddy County
10. Elevation (Show whether DR, RKB, RT, GR, etc.)	
3487¹	
11. Check Appropriate Box to Indicate N	Vature of Notice, Report or Other Data
NOTICE OF INTENTION TO:	SUBSEQUENT.REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK ALTERING CASING
	TELLING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS. PLUG AND
PULL OR ALTER CASING   MULTIPLE	ABANDONMENT CASING TEST AND
COMPLETION	CEMENT JOB
OTHER: EXTEND APD	OTHER:
12. Describe proposed or completed operations. (Clearly state all p	ertinent details, and give pertinent dates, including estimated date
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion	
or recompilation.	
•	•
Yates Petroleum Corporation wishes to extend the captioned well's APD expiration	
date for one (1) year March 12, 2001	
	APR 200 APR 200 OCD ARTESIA OCO ARTESIA
	(32)
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
' / \	e dest of my knowledge and belief.
SIGNATURE SIMUL SWOW TITLE	Regulatory Technician DATE 3/31/00
Type or print name Jamie Savoie	Telephone No. (505) 748-147
(This space for State use) June W. Sum	SUPERVISOR, DISTRICT II
APPPROVED BY BGB TITLE	DATE APR 1 0 2000
Conditions of approval if any	DATE