NMOCC COPY Form approved. Budget Bureau No. 42-R1424. Form 9-331 (May 1963) SUBMIT IN TRIPLI (Other instructions DEPARTMEN. OF THE INTERIOR verse side) 5. LEASE DESIGNATION AND SERIAL NO. GEOLOGICAL SURVEY NM 6010 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 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—" for such propoges, E C E I V 7. UNIT AGREEMENT NAME OIL GAS WELL \mathbf{k} OTHER WELL S. FARM OR LEASE NAME NAME OF OPERATOR Yates Petroleum Corporation > Stinking Draw a. c. c. 9. WELL NO. 3. ADDRESS OF OPERATOR 207 South 4th Street - Artesia, NM A8821A OFFICE LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)

At surface 10. FIELD AND POOL, OR WILDCAT 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 1383' FSL & 695' FEL of Section 10-21S-22E Sec. 10-21S-22E Unit I NMPM 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 12. COUNTY OR PARISH | 13. STATE 14. PERMIT NO. 4177' GR Eddy 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF REPAIRING WELL MULTIPLE COMPLETE FRACTURE TREATMENT ALTERING CASING ABANDON* SHOOTING OR ACIDIZING ABANDON MENT

Extend the Drilling (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

SUBSEQUENT REPORT OF:

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Due to not having a rig available at this time will you please extend the drilling of this well.

U.S. GEULUGICAL SURVEY

NM

18. I hereby certify that the foregoing is true and correct SIGNED TITLE	Geol. Secty	DATE	2-13-78
(This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	E ACTING DISTRICT ENGINEER	DATE _	MAR 1 7 1978

THIS APPROVAL IS RESCINDED IF OPERATIONS ARE NOT COMMENCED WITHIN 3 MONTHS. JUN 1 7 1978 EXPIRES

NOTICE OF INTENTION TO:

CHANGE PLANS

PRACTURE TREAT

REPAIR WELL

(Other)

SHOOT OR ACIDIZE