Submit 3 Copies to Appropriate District Office District I	Energy,		New Mexiond Natura	co al Resources		Y	Form C-Revised March 25, 1	
1625 N. French Dr., Hobbs, NM 88240					WELL API N 30-015-1041	1		
District II 811 South First, Artesia, NM 88210	OIL CONSERVATION DIVISION				5. Indicate Type of Lease			
District III	2040 South Pacheco St.				STATE X FEE			
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505				6. State Oil & Gas Lease No.			
2040 South Pacheco, Santa Fe, NM 87505					V-4983			
SUNDRY NOTIC	CES AND I	REPORTS	ON WEI	LLS	7. Lease Nan	ne or Unit Agre	ement Name:	
(DO NOT USE THIS FORM FOR PRO							4	
DIFFERENT RESERVOIR. USE "AP PROPOSALS.)	PLICATION F	OR PERMIT" (FORM C-101) FOR SUCH	T 1 AVC	74-4-	Dr.ochieb	
1. Type of Well:					Tyler AVC S	state	RESEIVED OCD ARTESI	,
Oil Well Gas Well X Other					8. Well No.		OUD ANTESH	1
2. Name of Operator					1			
Yates Petroleum Corporation					9. Pool name or Wildcat			
3. Address of Operator 105 South Fourth Street, Artesia, New Mexico 88210					Undes Baldridge Canyon, Morrow			
4. Well Location	a, New Mexic	0 60210			CINGES BUILD	.ugo		
	700' fe	et from the	South	line and	2230'	_feet from the_	East	line
Unit Letter: J := := Section 30		Township 2		nge 25E	NMPM	County	Eddy	
Beetion 30				ether DF, RKB,	RT, GR, etc.)			
			·	3908'				
11. Check	Appropri	ate Box to	Indicate	Nature of Not	tice, Report,	or Other Dat	ta	
NOTICE OF INTENTION TO:					SUBSEQUE	NT REPORT	r of:	
PERFORM REMEDIAL WORK	PLUG AN	ID ABANDON		REMEDIAL WO	rk [ALTE	ERING CASING	
TEMPORARILY ABANDON	CHANGE	PLANS		COMMENCE DR	RILLING OPNS. [S AND NDONMENT	
PULL OR ALTER CASING	MULTIPL COMPLE			CASING TEST A	and [
OTHER: Extend APD			X	OTHER:				
12. Describe proposed or completion of starting any proposed wor recompletion.	ork). SEE F	RULE 1103. 1	For Multip	de Completions:	Attach wellbo	re diagram of p	oroposed comple	etion
Yates Petroleum Corporation wish	hes to extend	the captioned	well's APD	expiration date f	for one (1) year	to March 9, 200		
I hereby certify that the inform	ation above i	s true and co	mplete to	the best of my kr	nowledge and b	elief.		
	\sim	•	TITLE	Regulatory		DATE	02/08/01	
		KNVU.CL		Regulatory				
Type or print name Darlene Ch				***		Telephone No.	(505) 748-14	
(This space for State use) APPROVED BY	GRIGH	MAL SIGNE! NET H SUPE	By Tim	w. gum		DATE	FEB 162	, TU
Conditions of approval, if any:		- -						