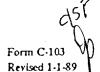
Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department



DISTRICT I

OH CONSEDUATION DIVISION

	Form C-103 Revised 1-1-89
LL API NO. 30-015-28149	

P.O. Box 1980, Hobbs, NM 88240	P.O. Box 2088 Santa Fe, New Mexico 87504-2088		WELL API NO.
DISTRICT II			30-015-28149
P.O. Drawer DD, Artesia, NM 88210 DISTRICT III			5. Indicate Type of Lease  STATE FEE X
1000 Rio Brazos Rd., Aziec, NM 87410			6. State Oil & Gas Lease No.
DIFFERENT RESE	ICES AND REPORTS ON WE OPOSALS TO DRILL OR TO DEEPEN RVOIR. USE "APPLICATION FOR PE 101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
I. Type of Well: Oli. QAS WELL X WELL	OTHER	. /	Alto "AOL" Com.
2. Name of Operator YATES PETROLEUM CORPOR			8. Weil No.
3. Address of Operator 105 South Fourth Stre			9. Pool name or Wildcat Dagger Draw, Upper Penn, Nort
4. Well Location	980 Feet From The North	660	East
	10 Co+h	Line and 25 East	· · · · · · · · · · · · · · · · · · ·
Section 21	Township 19 500 th Ra  10. Elevation (Show whether	ange	NMPM Eddy County
	3472'		
	Appropriate Box to Indicate 1		<del>-</del>
NOTICE OF INT	ENTION TO:	SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND CE	MENT JOB
OTHER: Extend APD	X	OTHER:	
12. Describe Proposed or Completed Operawork) SEE RULE 1103.	tions (Clearly state all pertinent details, ar	nd give pertinent dates, inclu	ding estimated date of starting any proposed
Yates Petroleum Corpora	ation wishes to extend t	the captioned wel	Is APD for (6) six months
from the expiration d	ate of January 25, 1996	j.	
Thank you.			RECEIVED
APF	PROVAL VALID FORDA	¥YS	GAN 12 7898
PE	RMIT EXPIRES	76 Y	OIL CON. DIV.
O	MEEGS DRILLING ONDERVICE		Olet, 2
	$\mathcal{M}$		
I hereby certify that the information above is true	and complete to the best of my knowledge and	bdid.	
SIGNATURE 1	m m	<sub>le</sub> <u>Landman</u>	DATE 1-11-1996
TYPE OR PRINT NAME ORIGINA	AL SIGNED BY TIM W. GUM		TELEPHONE NO.
	T II SUPERVISOR		