

N. M. Oil Cons. Div.
811 S. 1ST ST.
ARTESIA, NM 88210-2834

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

C/SF

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

<p>1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other</p> <p>2. Name of Operator YATES PETROLEUM CORPORATION (505) 748-1471</p> <p>3. Address and Telephone No. 105 South 4th St., Artesia, NM 88210</p> <p>4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FSL & 660' FEL of Section 7-T9S-R22E (Unit I, NESE)</p>	<p>5. Lease Designation and Serial No. NM-36715</p> <p>6. If Indian, Allottee or Tribe Name</p> <p>7. If Unit or CA, Agreement Designation</p> <p>8. Well Name and No. Blackwater ACX Federal #1</p> <p>9. API Well No. 30-005-62946</p> <p>10. Field and Pool, or Exploratory Area Pine Lodge Abo</p> <p>11. County or Parish, State Chaves Co., NM</p>
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12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent <input checked="" type="checkbox"/> Subsequent Report <input type="checkbox"/> Final Abandonment Notice	<div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input checked="" type="checkbox"/> Other <u>Change well name</u></div><div><input type="checkbox"/> Change of Plans <input type="checkbox"/> New Construction <input type="checkbox"/> Non-Routine Fracturing <input type="checkbox"/> Water Shut-Off <input type="checkbox"/> Conversion to Injection <input type="checkbox"/> Dispose Water</div></div> <p style="font-size: small;">(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)</p>

13. 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.)*

Effective March 1, 1996, please change well name as follows:

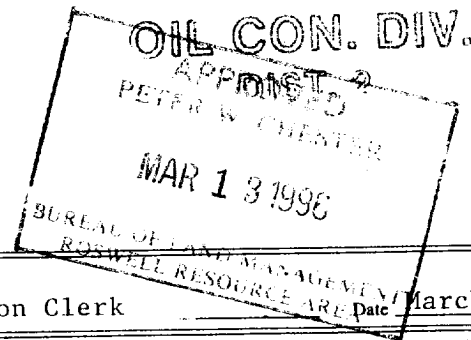
FROM: Blackwater Unit #3

TO: Blackwater ACX Federal #1

*Post ID-3
3-22-96
chgy well name*

RECEIVED

MAR 14 1996



14. I hereby certify that the foregoing is true and correct

Signed *Rustyn Klen* Title Production Clerk
(This space for Federal or State office use)

Approved by _____ Title _____ Date March 8, 1996
Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side