

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. C/O  
U.S. BUREAU  
OF LAND MGMT.

C/SF

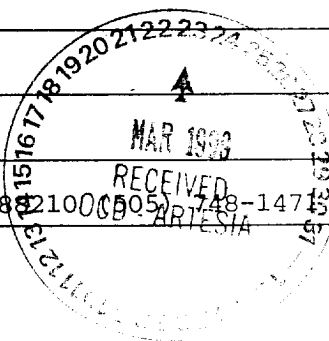
FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

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

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM-36724
2. Name of Operator YATES PETROLEUM CORPORATION	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 105 South Fourth Street, Artesia, New Mexico 88210	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FNL and 660' FEL Section 20, T8S-R22E	8. Well Name and No. Salt Creek ACD Federal #4
	9. API Well No. 30-005-62950
	10. Field and Pool, or Exploratory Area West Pecos Slope Abo
	11. County or Parish, State Chaves County, New Mexico



12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other EXTEND APD	<input type="checkbox"/> Dispose Water
		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)

Yates Petroleum Corporation wishes to extend the captioned well's APD expiration date for one (1) year to March 30, 2000.

Thank you.

APPROVED FOR 12 MONTH PERIOD  
ENDING MAR 30 2000

14. I hereby certify that the foregoing is true and correct		
Signed <u>[Signature]</u>	Title <u>Regulatory Technician</u>	Date <u>February 9, 1999</u>
(This space for Federal or State office use)		
Approved by <u>(ORIG. SGD.) DAVID R. GLASS</u>	Title <u>PETROLEUM ENGINEER</u>	Date <u>MAR 22 1999</u>
Conditions of approval, if any:		