

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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	2. Name of Operator YATES PETROLEUM CORPORATION (505) 748-1471	3. Address and Telephone No. 105 South 4th St., Artesia, NM 88210	4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FSL & 990' FWL of Section 21-T8S-R22E (Unit L, NWSW)	5. Lease Designation and Serial No. NM-36724	6. If Indian, Allottee or Tribe Name	7. If Unit or CA, Agreement Designation	8. Well Name and No. Salt Creek ACD Federal #3	9. API Well No. 30-005-62951	10. Field and Pool, or Exploratory Area Pecos Slope Abo, West	11. County or Parish, State Chaves Co., NM
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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 type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" 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 Change well name	<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.)*

Effective December 1, 1995, please change well name as follows:

FROM: Salt Creek Unit #7

TO: Salt Creek ACD Federal #3

RECEIVED

JAN 16 1996

OIL CON. DIV.

DIST. 2



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

Signed Rusty Klein

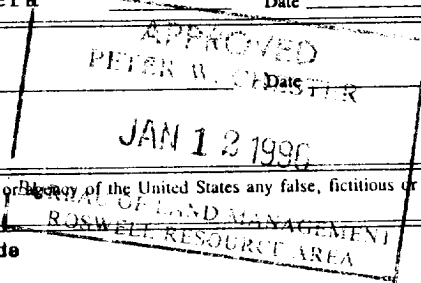
Title Production Clerk

Date December 29, 1995

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____



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