Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-100	3
Revised 1-1	-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION
P.O. Box 2088

WELL API NO. 30-005-62974

DISTRICT II	Santa Fe, New Mexico 87504-2088 30-			-005-62974 • ·		
P.O. Drawer DD, Artesia, NM 88210 DISTRICT III	o, riew michie	201304-2000	5. Indicate Type of	of Lease		
1000 Rio Brazos Rd., Aztec, NM 87410	JAN 1 2 1994 State Oil & Gas Lease No.					
			P OR SIZE OIL & G2	s Lease No. VB-233		
SUNDRY NOTICES (DO NOT USE THIS FORM FOR PROPOSE DIFFERENT RESERVOISE	AND REPORTS ON W	ELLS			//////	
- THE THE TEST TO	1. USE APPLICATION FOR I	EN OR PLUG BACK TO A PERMIT"	7. Lease Name or	Unit Agreement Name		
I. Type of Well:	FOR SUCH PROPOSALS.)	·				
OEL X GAS WELL Z Name of Operator	OTHER		Carl ''ANG	O'' State		
YATES PETROLEUM CORPORATION	ı V		8. Well No. 3			
3. Address of Operator 105 South Fourth Street, Ar	togic Nor-Mari	00010	9. Pool name or W	/ildcat		
4. Well Location		South		st Acme San A	ndres	
Unit Letter N : 330 F	eet From The South	Line and	Feet From	The West	Li:	
	ownship 8 South	Range 27 East	nmpm Chave			
	10. Elevation (Show whether 3969' GR	er DF, RKB, RT, GR, etc.)	MIPM STATE	 \///////////////////////////////////	County	
II. Check Appro	<u> </u>	N				
NOTICE OF INTENT	opriate Box to Indicate					
PERSONA PER MANAGEMENT		SUBS	SEQUENT R	EPORT OF:		
	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING		
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	·——	PLUG AND ABANDO	NMENT	
PULL OR ALTER CASING		CASING TEST AND CEMENT JOB				
OTHER:		OTHER: EXTEND APD				
12 Describe Proposed on Communication					X	
 Describe Proposed or Completed Operations (C work) SEE RULE 1103. 	learly state all pertinent details, o	and give pertinent dates, includi	ng estimated date of s	starting any proposed		
YATES PETROLEUM CORPORATION	WISHES TO EXTEND T	HE ABOVE CAPTIONEI	WELL FOR AN	NOTHER SIX MO	NIHS.	
THANK YOU.						
I hereby certify that the information above is true and com	plete to the best of my knowledge and	belief.				
SIGNATURE CONTRACTOR 100		PERMIT AGE	NT	1/11/94	, 	
TYPE OR PRINT NAME CLIFTON R. MA'				DATE	3-1471	
(This space for State Use)						
SUPERVISOR, DIS	TRICT II			JAN 2 4 1	994	
AMROVED BY		1 F				