

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Artesia, NM 88210

NM SUBMOBILE TRAIL STATION
(Other instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

4/57

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐
2. NAME OF OPERATOR
YATES PETROLEUM CORPORATION
3. ADDRESS OF OPERATOR
207 South 4th Street, Artesia, New Mexico 88210

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
890' FNL and 360' FEL

14. PERMIT NO.
15. ELEVATIONS (Show whether DF, RT, GR, etc.)
6991' GL

5. LEASE DESIGNATION AND SERIAL NO.
NM-31496
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Munoz Canyon "AAN" Federal
9. WELL NO.
1
10. FIELD AND POOL, OR WILDCAT
Wildcat-*See Card*
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 10-T10S-R15E
12. COUNTY OR PARISH
Lincoln
13. STATE
N.M.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>		

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. 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.)*

This well will be cased with a Rat Hole machine on 10/31/84. Young Rig #5 is currently drilling our Alpha "AAA" Federal #1. They will be moving within a week to 10 days to this location. We are requesting an extension of this lease for 30 days.

This is an expiring lease 10/31/84.

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

SIGNED

Cy Cowan

TITLE

Regulatory Agent

DATE

10/30/84

(This space for Federal or State use only)

(Orig. Sgd.) PETER W. CHESTER

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

OCT 31 1984

*See Instructions on Reverse Side