

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-041-20879
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. V-3514
7. Lease Name or Unit Agreement Name Sawyer North Unit
8. Well No. 1
9. Pool name or Wildcat Wildcat Permo Penn

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" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator YATES PETROLEUM CORPORATION	
3. Address of Operator 105 South Fourth Street, Artesia, New Mexico 88210	
4. Well Location: Unit Letter <u>SI</u> : <u>2310</u> Feet From The <u>South</u> Line and <u>700</u> Feet From The <u>East</u> Line Section <u>32</u> Township <u>8 South</u> Range <u>38 East</u> NMPM <u>Roosevelt</u> County <u></u>	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3960'	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <u>Change Well Name</u> <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Yates Petroleum Corporation wishes to change the name of this well from Sawyer North #1 to the Sawyer North Unit #1. Approval of the unit has been received from OCD, order No. R-10512 and BLM No. NMNM94476X.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Clifton R. May TITLE Regulatory Agent DATE 12-05-95
TYPE OR PRINT NAME: Clifton R. May TELEPHONE NO. 505-748-1471

(This space for State Use)
ORIGINAL SIGNATURE OF CLERK OF DISTRICT COURT

APPROVED BY _____ TITLE _____ DATE DEC 12 1995
CONDITIONS OF APPROVAL, IF ANY: _____

