Sulmit 3 Copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resource

District Office Zingy, Williams and Wathral Re	sources Department	Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATIO	N DIVISION	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 P.O. Drawer DD, Artesia, NM 88210 P.O. Box 2088 Santa Fe, New Mexico 8	8 87504-2088 WELL APT NO. 30-025-332	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	5. Indicate Type	of Lease STATE X FEE
	6. State Oil & Ga V-035	s Lease No
SUNDRY NOTICES AND REPORTS ON WELL (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OF DIFFERENT RESERVOIR. USE "APPLICATION FOR PERIOR (FORM C-101) FOR SUCH PROPOSALS.)		Unit Agreement Name
1. Type of Well: Ol: VELL XX GAS WELL OTHER 2. Name of Operator	, Papalotes	
YATES PETROLEUM CORPORATION	8. Well No. #1	
3. Address of Operator 105 South Fourth Street Artesia, New Mexico 4. Well Location	9. Pool name or Wildcat St	Vildcat
Unit Letter I: 1960 Feet From The South		-
Section 34 Township 14 South Range	ve 34 East Name 19a	-
10. Elevation (Show whether DF 4092 GR	F, RKB, RT, GR, etc.)	Count
Check Appropriate Box to Indicate Na NOTICE OF INTENTION TO:	ature of Notice, Report, or Other	<i>Y////////////////////////////////////</i>
PERFORM REMEDIAL WORK	SUBSEQUENT RI	EPORT OF:
TEMPORARILY ABANDON CHANGE PLANS	·	ALTERING CASING
PULL OR ALTER CASING		PLUG AND ABANDONMENT
OTHER: Name Change	CASING TEST AND CEMENT JOB	
	OTHER:	
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and g work) SEE RULE 1103.	give pertinent dates, including estimated date of	starting any proposed
Yates Petroleum Corporation wishes to change the #1 to a unit well named the Papalotes Unit #1. T by the OCD order No. R-10540.	name of the well from the P The unit was approved on Jar	Papalotes nuary 25, 1996
OPER. OGRID NO. 25575		
PROPERTY NO		
POOL CODE		
EFF. DATE		
APINO. 30-025-33275		

I hereby certify that the information above is true and complete to the hour of	·
I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Regulatory Agent	
	1-30-96
TYPE OR PRINT NAME CLIFTON R. MAY	
THE OKPONT NAME CLIFF (ON M. /) (A)	PHONE NO. 748-434

(This space for State Use)

COMMAN, SECRET BY
COMMAN, SECRET
FOR COMMAN

FEB 01 1996

APPROVED BY =