Submit 3 Copies to Appropriate
District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

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

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

DISTRICT III

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088 WELL API NO. 30-025-31667

5. Indicate Type of Lease STATE XX FEE

	• • • • • • • • • • • • • • • • • • •
1000 Rio Brazos Rd., Aztec, NM 87410	6. State Oil & Gas Lease No. V-3273
SUNDRY NOTICES AND REPORTS ON WEL	IS ////////////////////////////////////
( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN	OR PLUG BACK TO A
DIFFEHENT RESERVOIR. USE "APPLICATION FOR PER	7. Lease Name or Unit Agreement Name
(FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well:	
OIL X OTHER	Eidson Ranch Unit
2. Name of Operator	8. Well No.
YATES PETROLEUM CORPORATION	#3
3. Address of Operator	9. Pool name or Wildcat
105 South Fourth Street, Artesia, NM 88210	Arab - C San Andres
4. Well Location	Mab C Sull Allul ES
Unit Letter W: 660 Feet From The South	Line and 1650 Feet From The East Line
	nge 33 East NMPM Lea County
10. Elevation (Show whether to 4235' GR	DF, RKB, RT, GR, etc.)
11. Check Appropriate Box to Indicate N	Vature of Notice Report or Other Data
107107 of the property of Millians Planties of Produce, Report of Onice Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	CASING TEST AND CEMENT JOB
OTHER: EXTEND APD X	OTHER:
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and work) SEE RULE 1103.	d give pertinent dates, including estimated date of starting any proposed
Yates Petroleum Corporation wishes to extend th	e aboved mentioned well's expiration date
17	a aboved memoroned herr 5 exprinction date
for six months.	
IOI WIN HOHEID.	

	Expires	Aug 4, 1997
I hereby certify that the information above is true and complete to the best of my knowledge and belief		
SIGNATURE Clift R. Yhay	Regulatory Agent	8-1-96
TYPE OR PRINT NAME CITETON R. May	(505) 748-147	
		TELEPHONE NO.

Thank you.