Submit 3 Copies to Appropriate District Office

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

Form C-103 Revised 1-1-89

OIL CONSERVATION DIVISION OIL CONSERVATION DIVISION		WELL API NO.			
P.O. Box 2088  P.O. Drawer DD. Artesia NM 88210  Santa Fe, New Mexico 87504-2088		30-025-34256			
P.O. Drawer DD, Artesia, NM 88210  DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410		2.20 . 2000	5. Indicate Type	of Lease STATE X	
		•	6. State Oil & Ga		FEE
				VA-1318	
SUNDRY NOTIC (DO NOT USE THIS FORM FOR PROF	ES AND REPORTS ON WE	LLS			
DIFFERENT HESERA	OIH. USE APPLICATION FOR PE	RMIT	7. Lease Name of	Unit Agreement Name	
(FORM C-101) FOR SUCH PROPOSALS.)  1. Type of Well:			Blackmon ARM State		
METT X METT OVER THE CONTRACT OF THE CONTRACT	OTHER	•			
2. Name of Operator YATES PETROLEUM CORPORA:	TTON		8. Well No.		
3. Address of Operator	TION			3	
105 South Fourth Street, Artesia, New Mexico 88210			9. Pool name or Wildcat West Lovington Penn		
4. Well Location					
Unit Letter N : 990	Feet From The South	Line and1665	Feet From	The West	Line
Section 16	Township 16S R	ange 36E	n em e	iea	
	10. Elevation (Show whether		NMPM 1	<u> </u>	County
	3909			<i>\$111111111111111111111111111111111111</i>	
11. Check A	ppropriate Box to Indicate				
NOTICE OF INTE	ENTION TO:	SUB	SEQUENT P	EPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING	Г
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS.	PLUG AND ABANDON	WENT [
PULL OR ALTER CASING CASING TEST AND CASING TE				LEGG AND ABANDON	HAISTAT [
OTHER: EXTEND APD	X		MENT JOB L.		_
		OTHER:			
<ol> <li>Describe Proposed or Completed Operatio work) SEE RULE 1103.</li> </ol>	ns (Clearly state all pertinent details, ar	nd give persinent dates, includ	ling estimated date of	starting any proposed	
Yates Petroleum Corporat	ion wishes to extend t	he captioned wel	l's expirati	on date for	
	nuary 6, 2000 .	_		4400 101	
	•				
Thank you.					
7.000					
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		6 <	a. T		
I hereby certify that the adormation above is true an	ad complete to the best of my knowledge and	- XPIFE	is van	. b, 2000	
Ca Burn	1			,	
SIONATURE	π	Regulatory Tec	chnician	DATE12/1/9	8
TYPE OR PRINT NAME Cy Cowan		(505) 748-147	Ĺ	TELEPHONE NO.	
(This space for State Hea)	I TO SO BY				