В						FORM APPROVED OMB NO. 1004-0135 Expires: July 31, 2010 5. Lease Serial No. NMNM31198	
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.					6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE - Other instructions on reverse side.					7. If Unit or CA/Agreement, Name and/or No.		
1. Type of Well Gas Well Other					8. Weil Name and No. COPELAN FEDERAL 1		
2. Name of Operator Contact: TINA HUERTA YATES PETROLEUM CORPORATIONE-Mail: tinah@yatespetroleum.com					9. API Well No. 30-015-23720-00-S1		
3a. Address 105 SOUTH FOURTH STREE ARTESIA, NM 88210	3b. Phone No. (ind Ph: 575-748-4 Fx: 575-748-45	168	e) 10. Field and Pool, or Exploratory PENASCO DRAW				
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11. County or Parish, and State			
Sec 5 T19S R25E SESW 660FSL 1980FWL					EDDY COUNTY, NM		
12. CHECK APP	ROPRIATE BOX(ES) T	O INDICATE NA	TURE OF 1	NOTICE, RI	EPORT, OR OTHEI	R DATA	
TYPE OF SUBMISSION	TYPE OF ACTION						
□ Notice of Intent	Acidize	Deepen	Deepen		ion (Start/Resume)	□ Water Shut-Off	
Subsequent Report	Alter Casing	Fracture Treat		Reclamation		Well Integrity	
	Casing Repair	—	□ New Construction		olete	□ Other	
Final Abandonment Notice	<ul> <li>Change Plans</li> <li>Convert to Injection</li> </ul>	_	-		arily Abandon Disposal		
testing has been completed. Final A determined that the site is ready for f Reclamation work has been o Yates will continue to monitor be submitted when the potent	inal inspection.) completed on this plugged until BLM objectives hav	l well. e been met. A Fi	nal Abandor	-	-	SERVATIO	
					JAN 0 3 2017		
Location needs place to prese. to previos well	los lactive	Need Meed	4 7	and move.		Needia	
14. Phereby certify that the foregoing is true and correct. Electronic Submission #347741 verified by the BLM Well Information System For YATES PETROLEUM CORPORATION, sent to the Carlsbad Committed to AFMSS for processing by PRISCILLA PEREZ on 08/12/2016 (16PP2025SE)							
Name (Printed/Typed) TINA HUE	Tit						
Signature (Electronic Submission)			DRA HON, sent to the Carisbad       SCILLA PEREZ on 08/12/2016 (16PP2025SE)       Title     REG REPORTING SUPERVISOR       Date     08/12/2016				
Rejected at this	tim THIS SPACE F	OR FEDERAL (	OR STATE	OFFICE U	SE COYN	NO Letter	
Approved By James Ch. Como			Title SET Date				
Conditions of approval, if any, are attached certify that the applicant bolds legal or eq which would entitle the applicant to condu-	s not warrant or e subject lease	Office CFD					
Title 18 U.S.C. Section 1001 and Title 43 States iny false, fightitious or fraudulent					ake to any department or	agency of the United	
** BLM REV	ISED ** BLM REVISE	D ** BLM REVI	SED ** BL		O ** BLM REVISE	D **	