REC	CEIV	ED				0 0	D-ARTE	SIA		
Form 8160-4 (August 2007) MA	Y 18	2010		UNITED ST		OR			FORM APPROVED OMB NO 1004-0137	
(August 2007) Mit		RTES							Expires July 31, 2010	
- INIMO	NIMOWELL COMPLETION OR RECOMPLETION REPORT AND LOG								5 Lease Serial No	
1a Type of Well	011	Well	X Gas Well	Dry	Other		,		NM-69323	
b Type of Completion		New Well	Work Over	Deepen	X Piug Ba	ick	Diff R	esvr,	6 If Indian, Allottee or Tribe Name	
2 Name of Operato		her: RE	COMPLET	ION					7 Unit or CA Agreement Name and No	
Yates Petrole		poration						NMNM101367		
3 Address				3a Phone No	(include are	ea code)			8 Lease Name and Well No	
105 S. 4th Str	r., Artesi	a, NM 8	8210	575-748-		ants)*			Sedge BPL Federal Com #	
Cast 99397										
At top prod Inter-	val reporte	d below		58	me as abo	Jve		(Gas	Survey or Area Section 18-T22S-R23E	
At total depth	At total depth Same as above							12 County or Pansh 13 State Eddy New Mexico		
14 Date Spudded			15 Date T.D R		16 Date Co	·	······	/15/10	17 Elevations (DF,RKB,RT,GL)*	
	2/28/10		11/	3/92		D&A	ر	to Prod	4268'GL 4286'KB	
18. Total Depth MI		10,035' NA		19. Plug Back T E	MD TVD	9504' NA	20. Depth Brid	lge Plug Set	t мd 9504' тvd NA	
21 Type Electric & Other Mechanical Logs Run (Submit copy of each) 22 Was Well cored? X No Yes (Submit analysis) None for recompletion X No Yes (Submit report) Directional Survey? X No Yes (Submit copy) 23 Casing and Liner Record (Report all strings set in well) Xes Xes Yes (Submit copy)										
Hole Size S	lize/Grade	Wt.(#/ft							Slurry Vol (BBL) Cement Top* Amount Pull	
		L					MPLETION			
24 Tubing Record		····-							ll	
Size	Depth Se	et (MD)	Packer Depth	(MD) Size	Depth	Set (MD)	Packer Depth	(MD) S	ize Depth Set (MD) Packer Depth (MI	
	25 Producing Intervals Formation Top			26 Perforation Record Bottom Perforated Interval Size			lize No Holes Perf Status			
A) Wolfcamp 6960'			6984' 6960'-6984'				25 Producing			
<u>C)</u> D)							ļ			
	27 Acid, Fracture, Treatment, Cement Squeeze, Etc							FPTED FUX KLOUKL		
Depth	Interval					Am	ount and Type o	fMaterial		
	- <u> </u>									
						MAY 1 5 2010				
28 Production - Inte Date First Te		Hours	Test	ЮІ	Gas	Water	Oil Gravity	Gas	Production Method	
Produced	1	Tested	Production		MCF	BBL	Corr API		Production Method REAU OF LAND MANAGEMENT	
	4/19/10	24		2	610	2	NA		CARLSBAD FIELDWAEFICE	
	bg Press wg	Csg Press	24 Hr Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	S	
									Producing	
28a Production-Interval B										
Date Eiret		Hours	Test		- Con	Water	Oil Gravity	Gar	Production Method	
Date First Te Produced	erval B est Date	Hours Tested	Test Production	Oıl BBL	Gas MCF	Water BBL	Oil Gravity Corr API	Gas Gravity	Production Method	

*(See instructions and spaces for additional data on page 2)

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28b Production			· · · · · · · · · · · · · · · · · · ·							
Date First	Test Date	Hours	Test	Oil	Gas	Water	Oil Gravity	Gas	Production Method	
Produced		Tested	Production	BBL	MCF	BBL	Corr API	Gravity		
	1		->							
Choke	Tbg. Press	Csg	24 Hr	Oil	Gas	Water	Gas/Oil	Well Stat	tus	
Size	Flwg	Press.	Rate	BBL	MCF	BBL	Ratio			
	-									
28c Production	- Interval D	1		I		1	<u> </u>			
Date First	Test Date	Hours	Test	Oil	Gas	Water	Oil Gravity	Gas	Production Method	
Produced		Tested	Production	BBL	MCF	BBL	Corr API	Gravity		
			->							
Choke	Tbg Press	Csg	24 Hr	01	Gas	Water	Gas/Oil	Well Stat	his	
Size	Fiwg	Press	Rate	BBL	MCF	BBL	Ratio	WCII Oldi	100	
0120		11000	->	000						
	1 0			1		1		I	• · · · · · · · · · · · · · · · · ·	and the state of the
29 Disposition of	of Gas (Sold,	usea for fuel,	vented, etc)							
Sold										
30. Summary of	Porous Zone	s (Include Ad	juifers)					31 Formation (Log) Markers		
Chave all import	tant sanaa al	a noroculty or	d contonta the	oof Corod in	toniala and	oll dell at	om tosto			
Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and										
recoveries		.,		,	p		-			
			·	Bottom	Deer				N	Тор
Formation			. Тор	Bottom	Desc	ription, Co	ontents, etc.	Name Meas Dep		
						·····				•
								PEE	ER TO ORIGINAL	
									LIN TO ONIGINAL	COMPLETION

32 Additional remarks (include plugging procedure).

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33 Indicate which items have been attach	ed by placing a check in the appropriate boxes ogs (1 full set req'd)	DST Report	Directional Survey
Sundry Notice for plug	ung and cement verification Core Analysis	Other Deviation	Survey
34 hereby certify that the foregoing and a	tached information is complete and correct as determi	ned from all available re	cords (see attached instructions)*
Name(please print)	Tina Huerta	Title	Regulatory Compliance Supervisor
Signature	in Kuerta	Date	April 20, 2010
	I S C. Section 1212, make it a crime for any person kn ements or representations as to any matter within its ju		nake to any department or agency of the United
(Questioned and and a 2)			(5 0400 4 0)