OPERATOR'S COPY

· Form 3160-5 (August 2007) UNITED STATES
DEPARTMENT OF THE INTERIOR

FORM APPROVED OMB No. 1004-0137

BUREAU OF LAND MANAGEMENT						Expires July 31, 2010										
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.						5. Lease Serial No. LC-026874F 6. If Indian, Allottee or Tribe Name										
									SUBMIT IN TRIPLICATE - Other instructions on page 2. 1. Type of Well						7. If Unit or CA/Agreement, Name and/or No.	
									Oil Well X Gas Well Other						8. Well Name and No.	
						Dosequis ASQ Federal Com #1										
Name of Operator Yates Petroleum Corporation						9. API Well No.										
3a. Address	3b. Phone	No. (include area code)			30-015-30464											
105 S. 4th Str., Artes		575-748-1471			10. Field and Pool or Exploratory Area											
4. Location of Well (Footage,					Hart Draw; Atoka											
						11. County or Parish, State										
660'FSL & 660'FEL of Section 30-T17S-R27E (Unit P, SESE)						Eddy County, New Mexico										
12. CHECK	APPROPRIATE BOX(ES) T	O INDICA	TE NATURE (OF NOTI	CE, REF	ORT, OR OTI	HER DATA									
TYPE OF SUBMISSION TYPE OF ACTION																
	Acidize	<u></u>	Deepen	P	roduction (St	art/Resume)	Water Shut-Off									
Notice of Intent	Alter Casing	<u> </u>	Fracture Treat	$\bigcap_{\mathbf{R}}$	eclamation	Ī	Well Integrity									
	Casing Repair	<u> </u>	New Construction	Ħ.	ecomplete	,	-									
X Subsequent Report		<u></u>	J 1	H	,	į	Other Operator									
F1	Change Plans	<u></u>	Plug and Abandon	Щт	emporarily A	bandon	Change									
Final Abandonmen	nt Notice Convert to Inject	tion	Plug Back		ater Disposa	J										
testing has been completed. Fir determined that the site is ready Former Operator:	nal Abandonment Notices must be filed only for final inspection. Yates Petroleum Corpora		nents, including rectarr	nation, have be	een complete	d and the operator has										
New Operator:	Operator: Limerock Resources A, L.P.															
Effective 12/1/07		i	OBIVEL C 1 6 2010 DD ARTES		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		AUDR / /									
14. Thereby certify that the fore	egoing is true and correct															
Name (Printed/Typed)	Tina Huerta	Title Regulatory Complia			ance Supervisor											
Signature C	na) luesta			ember 2												
	THIS SPAC	E FOR FED	ERAL OR STATE	OFFICE	USE											
Approved by			Title	1		Date										
Conditions of approval, if any, certify that the applicant holds which would entitle the applicant Title 18 U.S.C. Section 1001 ar	lease Offic		oto make to	any department or	appeary of the United States											
	It statements or representations as to a			, and wimuliy	NO INDICE IO	ану образовнен Ог	eyency of the Office States									

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