

HOBBS OCD

Form 3160-5
(August 2007)UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

JUN 26 2014

FORM APPROVED
OMB NO. 1004-0135
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.

RECEIVED

5. Lease/Serial No.
NMLC068882A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other8. Well Name and No.
FLOOD-AFN FEDERAL 12. Name of Operator
YATES PETROLEUM CORPORATION
Contact: LAURA WATTS
Mail: laura@yatespetroleum.com9. API Well No.
30-025-309443a. Address
105 SOUTH FOURTH STREET
ARTESIA, NM 882103b. Phone No. (include area code)
Ph: 575-748-4272
Fx: 575-748-458510. Field and Pool, or Exploratory
LUSK, DELAWARE, WEST

4. Location of Well (Footage, Sec., T., R., M., or Survey/Description)

Sec 30 T19S R32E SWSW 330FSL 660FWL

11. County or Parish, and State

LEA COUNTY, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input checked="" type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

5/20/14 - NU BOP. MIRU to perforate additional Delaware and stimulate. Set CIBP at 6,820 ft. Loaded casing with 112 bbls 3 percent KCL.
 5/21/14 - Loaded casing with 9 bbls 3 percent KCL. Tested casing to 500 psi. Bled off 80 psi in 30 mins. Dump bailed cement on CIBP. Charted casing to 500 psi. Lost 55 psi in 30 mins.
 5/22-25/14 - Tested casing and isolated leak coming from top squeeze perfs at 4,424 ft - 4,438 ft. Charted casing to 500 psi in 30 mins. Lost 20 psi. POOH with tools and charted casing again to 500 psi in 30 mins. Lost 20 psi. Notified BLM of leak. BLM to be on location at 7:00 am on 5/27/14 to approve test.
 5/26/14 - Pressured up casing to 540 psi. Charted for 30 mins. Lost 40 psi in 30 mins. BLM approved chart. Tagged TOC at 6,770 ft and perf'd 6,684 ft - 6,700 ft (9 holes). Spotted 84 gallons 7.5 percent NEFE acid. Spotted 210 gallons 7.5 percent NEFE acid at 6,700 ft. Acidized perfs with 2000 gallons 7.5 percent NEFE acid.

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #247685 verified by the BLM Well Information System
For YATES PETROLEUM CORPORATION, sent to the Hobbs

Name (Printed/Typed) LAURA WATTS

Title: REG REPORTING TECHNICIAN

Signature (Electronic Submission)

Date: 05/30/2014

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **

OCD Conditions of Approval ==
 Accepted for **RECORD ONLY**. All Federal
 forms requires BLM Approval.

FOR RECORD ONLY

BS OCD 7/2/2014

→ used to place in proper or
 in we file

DEC 08 2014

Additional data for EC transaction #247685 that would not fit on the form.

32. Additional remarks, continued.

Copy of chart attached, and a copy emailed to NMOCD:Hobbs.

HOBBS OCD

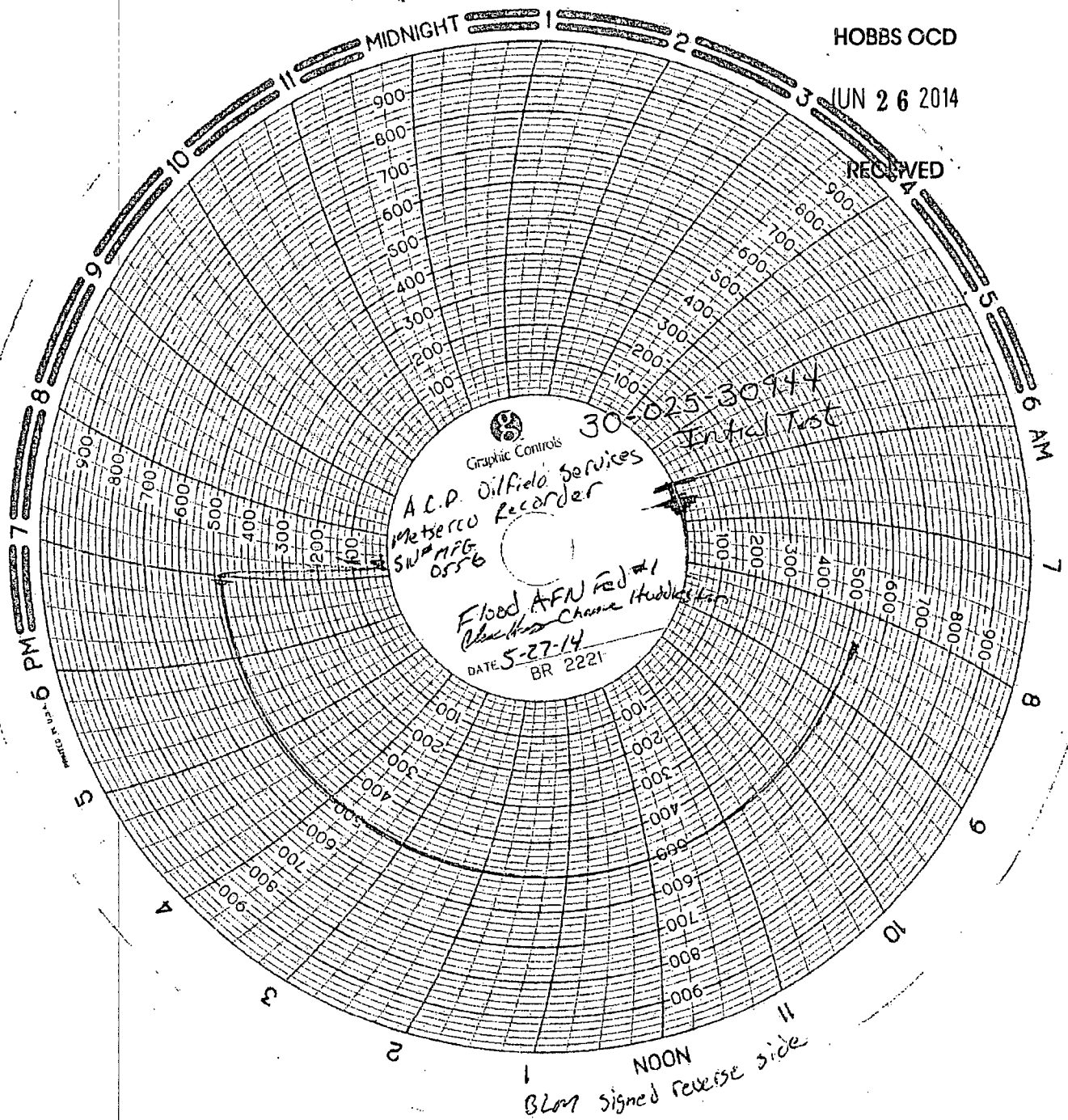
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Arch Johnson
BM 6/28/14