

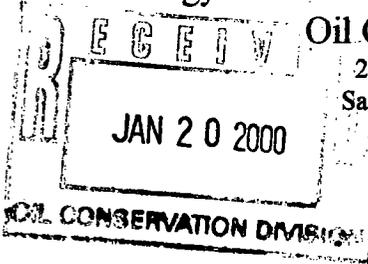
District I - (505) 393-6161
1625 N. French Dr
Hobbs, NM 88240
District II - (505) 748-1283
811 S. First
Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Road
Aztec, NM 87410
District IV - (505) 827-7131
2040 S. Pacheco
Santa Fe, NM 87505

Energy Minerals and Natural Resources Department

Oil Conservation Division

2040 South Pacheco Street
Santa Fe, New Mexico 87505
(505) 827-7131

SUBMIT ORIGINAL PLUS 2 COPIES TO THE SANTA FE OFFICE



APPLICATION FOR NEW WELL STATUS

I. Operator and Well

Operator name & address: E.G.L. Resources Inc. OGRID Number: 173413
Contact Party: Darren Printz Phone: 915-687-6560
Property Name: Oxy Yates 14 Fed Well Number: 14 API Number: 30-015-30804
UL Section Township Range Feet From The North/South Line Feet From The East/West Line County
A 14 20S 28E 990 N 330 E Eddy

II. Date/Time Information

Spud Date: 1/3/00 Spud Time: 6:00 PM Date Completed: 1/8/00 Pool: Russell Yates

- III. Attach copies of Form C-103 or Federal Form 3160-5 showing date/time of drilling commenced and Form C-105 or Federal Form 3160-4 showing well was completed as a producer.
IV. Attach a list of all working interest owners with their percentage interests.
V. AFFIDAVIT:

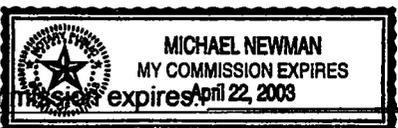
State of Texas)
County of Midland) ss.

Signature: Darren Printz, being first duly sworn, upon oath states:

- 1. I am the Operator, or authorized representative of the Operator, of the above-referenced well.
2. To the best of my knowledge, this application is complete and correct.

Signature: [Signature] Title: Operator Date: 1/18/00

SUBSCRIBED AND SWORN TO before me this 17th day of January, 2000.



[Signature] Notary Public

FOR OIL CONSERVATION DIVISION USE ONLY:

VI. CERTIFICATION OF APPROVAL:

This Application is hereby approved and the above-referenced well is designated a New Well. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval.

Signature: [Signature] Title: P.E. Spec. Date: 3-8-00

VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: 3/8/00

NOTICE: The operator must notify all working interest owners of this New Well certification.

PNZV2010829724

Lease/Deck	A/R	Owner	Owner's Name	Interest
OXY410	OXY	YATES FED 14 #14		
OXY410	1200	AMA760	AMARCO OIL CORP	0.20500000
OXY410	1200	BAR760	BARNES*ROGER E	0.00500000
OXY410	1200	BOG110	BOGART*MICHAEL S	0.00500000
OXY410	1200	LER960	LERWICK I LTD	0.10000000
OXY410	1200	NEW590	NEWMAN*MICHAEL D	0.00500000
OXY410	1200	OLI950	OLIVE PETROLEUM	0.05000000
OXY410	1200	PET760	PETRAITIS OIL & GAS INC	0.10000000
OXY410	1200	POR810	PORTER*WILLIAM L	0.00500000
OXY410	1200	PRI610	PRINTZ LTD	0.10000000
OXY410	1200	SCH570	SCHLAGAL BROTHERS	0.10000000
OXY410	1200	SES630	SES OIL & GAS INC	0.19500000
OXY410	1200	SMI810	SMITH*L CHRISTOPHER	0.00500000
OXY410	1200	SNY250	SNYDER*MARCUS	0.02000000
OXY410	1200	STA760	STARCK FAMILY LTD	0.10000000
OXY410	1200	WAR760	WARRICK*JEANNETTE C	0.00500000
OXY410	OXY	YATES FED		
			TOTAL	1.00000000

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY

FORM APPROVED
OMB No. 1004-0135
Expires July 31, 1996

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.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
 E.G.L. RESOURCES INC

3a. Address
 P.O. BOX 10886, MIDLAND, TX 79702

3b. Phone No. (include area code)
 915-687-6560

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
 990 FNL & 330 FEL, SEC 14 T20S R28E

5. Lease Serial No.
 LC 050797

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.
 23909

8. Well Name and No.
 OXY YATES 14 FED #14

9. API Well No.
 30-015-30804

10. Field and Pool, or Exploratory Area
 RUSSELL YATES

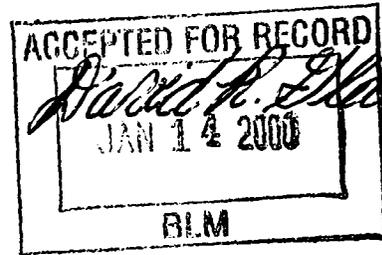
11. County or Parish, State
 EDDY CO, NM

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 checked="" type="checkbox"/> Other <u>NEW WELL</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input 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 recomplete 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.)

SEE ATTACHMENT A



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

Name (Printed/Typed) _____ Title Op Engineer

Signature [Signature] Date 1/12/00

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, makes 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.

ATTACHMENT A

Oxy Yates Federal 14 #14

E.G.L. RESOURCES INC

Sec. 14, T-20-S, R-28-E

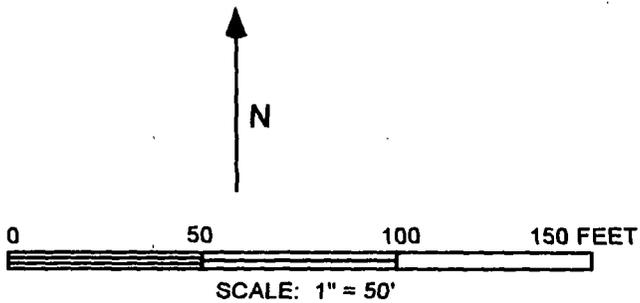
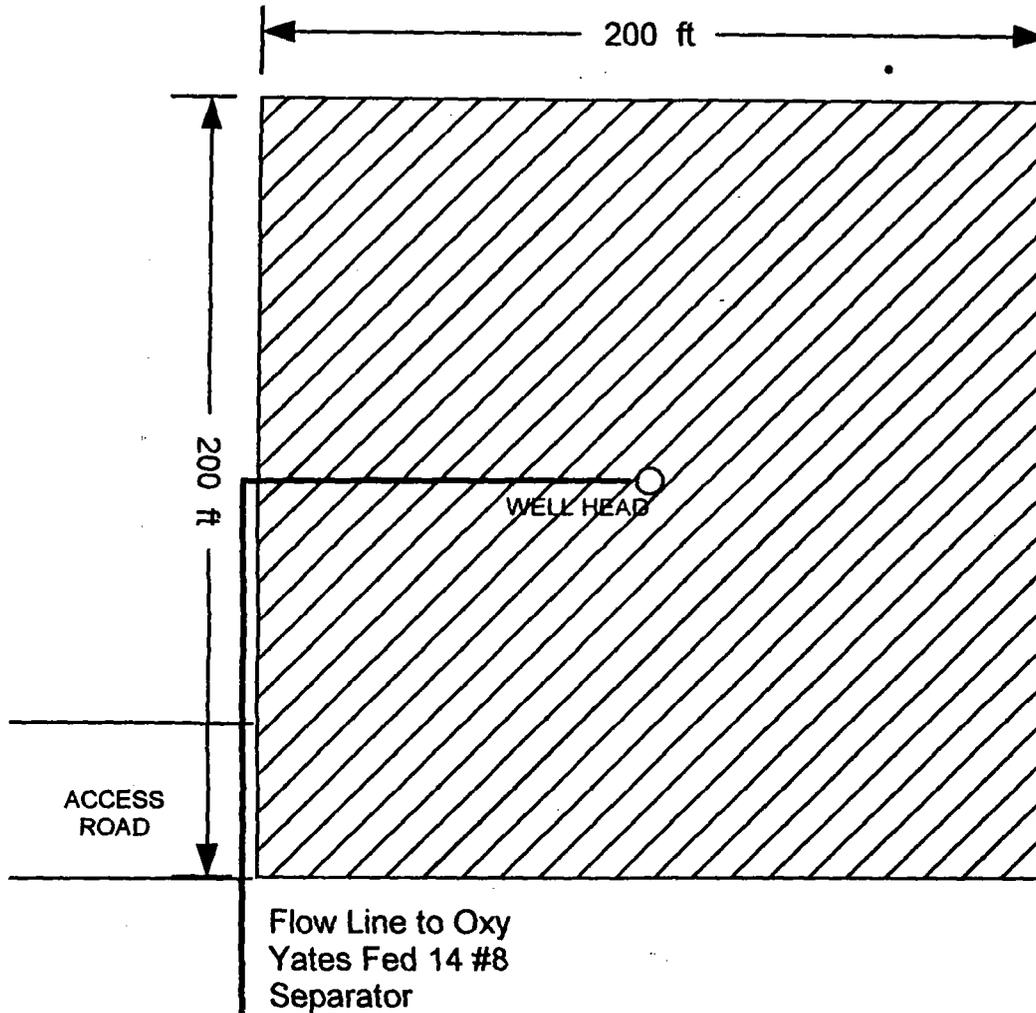
Eddy County, NM

1/3/00 TD 774' Rig up United rig #7. TD 774. 8 3/4" Hole. Run 20 jts 7" K55 23# Rng 3 Csg, Cemented with 450 sx Class C Cement. Cement to surf, Gene Hunt w/ BLM present.

1/7/00 TD 774 Rig up JWS PU #1

1/8/00 TD 961 Run 6 1/8" Smith bit on 16 DC. Test BOP. OK. Drill to 961'. POH w/ tbg, DC & bit. RIH w/ 25 jts 2 3/8" tbg, flange well up.

WELL SITE PLAT OXY YATES FED 14 #14



E.G.L. RESOURCES INC	
WELL SITE LAYOUT	
OXY YATES FED 14 #14 990' FNL, 330' FEL 20S 28E SEC 14	
DATE: 1/11/00	BY: DARREN PRINTZ

[Faint, illegible handwritten or stamped text]

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN DUPLICATE
OPERATOR'S COPY
(Other instructions on reverse side)

FORM APPROVED
OMB NO. 1004-0137
Expires: February 28, 1995

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

5. LEASE DESIGNATION AND SERIAL NO.
LC 050797

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
23909

8. FARM OR LEASE NAME, WELL NO.
OXY YATES 14 FED #14

9. API WELL NO.
30-015-30804

10. FIELD AND POOL, OR WILDCAT
RUSSELL YATES

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA
SEC 14, T20S R28E

12. COUNTY OR PARISH
EDDY

13. STATE
NM

1a. TYPE OF WELL: OIL WELL GAS WELL DRY Other _____

b. TYPE OF COMPLETION: NEW WELL WORK OVER DEEP-EN PLUG BACK DIFF. REVR. Other _____

2. NAME OF OPERATOR
E.G.L. RESOURCES INC

3. ADDRESS AND TELEPHONE NO.
P.O. BOX 10886, MIDLAND, TX 79702 915-687-6560

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 990 FNL & 330 FEEL
At top prod. interval reported below SAME
At total depth SAME

14. PERMIT NO. _____ DATE ISSUED _____

15. DATE SPUNDED 1/3/00	16. DATE T.D. REACHED 1/8/00	17. DATE COMPL. (Ready to prod.) 1/8/00	18. ELEVATIONS (DF, RKB, RT, OR, ETC.)* 3252 GL	19. ELEV. CASINGHEAD 3252
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20. TOTAL DEPTH, MD & TVD 961'	21. PLUG, BACK T.D., MD & TVD 961'	22. IF MULTIPLE COMPL. HOW MANY*	23. INTERVALS DRILLED BY →	ROTARY TOOLS ALL	CABLE TOOLS
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24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*
774' - 961' yates

25. WAS DIRECTIONAL SURVEY MADE
YES

26. TYPE ELECTRIC AND OTHER LOGS RUN
NONE

27. WAS WELL CORED
NO

28. CASING RECORD (Report all strings set in well)

CASING SIZE/GRADE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	TOP OF CEMENT, CEMENTING RECORD	AMOUNT PULLED
7" K55	23#	774	8 3/4	4506x Class C Circ	

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	BACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 3/8	767	

31. PERFORATION RECORD (Interval, size and number)
774 - 961 OH

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH	INTERVAL (MD)	AMOUNT	KIND OF MATERIAL USED
<i>David A. Glass</i>			

33. PRODUCTION

DATE FIRST PRODUCTION 1/8/00	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing (Waiting on PU)	WELL STATUS (Producing or shut-in) SI
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DATE OF TEST 1/8/00	HOURS TESTED 1	CHOKE SIZE 1/8	PROD'N. FOR TEST PERIOD →	OIL--BBL. →	GAS--MCF. TSM	WATER--BBL. 0	GAS-OIL RATIO
FLOW. TUBING PRBS. 0	CASING PRESSURE 0	CALCULATED 24-HOUR RATE →	OIL--BBL. →	GAS--MCF. →	WATER--BBL. →	OIL GRAVITY-API (CORR.)	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)
VENTED

TEST WITNESSED BY
John Starck

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED *[Signature]* TITLE *Op Engineer* DATE *1/12/00*

*(See Instructions and Spaces for Additional Data on Reverse Side)

7. SUMMARY OF POROUS ZONES: (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):

38.

GEOLOGIC MARKERS

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
	0	47	CALICHE			
	47	90	SAND & REDBED			
	90	280	REDBED			
	280	430	REDBED & ANHYDRITE	SALADO	430	430
	430	585	SALT	TANSILL	585	585
	585	770	ANHYDRITE & DOLOMITE	YATES	770	770
	770	961	DOLOMITE & SAND			