

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED
OMB NO 1004-0137
Expires July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a Type of Well ☒ Oil Well ☐ Gas Well ☐ Dry ☐ Other
b Type of Completion ☐ New Well ☐ Work Over ☐ Deepen ☒ Plug Back ☐ Diff Resvr
Other: RECOMPLETION

2 Name of Operator
Yates Petroleum Corporation

3. Address
105 S. 4th Str., Artesia, NM 88210

3a Phone No (include area code)
575-748-1471

4 Location of Well (Report location clearly and in accordance with Federal requirements)*

At Surface 660'FNL & 660'FEL (Unit A, NENE)

At top prod Interval reported below

Same as above

At total depth Same as above

RECEIVED

JUN 05 2012

NMOCD ARTESIA

5 Lease Serial No

NM-78214

6 If Indian, Allottee or Tribe Name

NA

7. Unit or CA Agreement Name and No

NA

8 Lease Name and Well No

Anemone ANE Federal #5

9 API Well No

30-015-31323 SZ

10 Field and Pool or Exploratory

Wildcat; Bone Spring 97943

11. Sec., T., R., M., on Block and
Survey or Area

Section 9-T22S-R24E

12 County or Parish

Eddy

13 State

New Mexico

14 Date Spudded
RC 4/8/12

15 Date T.D. Reached
11/10/00

16. Date Completed 5/7/12
☐ D & A ☒ Ready to Prod

17 Elevations (DF, RKB, RT, GL)*

4078'GL 4097'KB

18 Total Depth: MD 10,600'
TVD NA

19. Plug Back T.D.: MD 7607'
TVD NA

20 Depth Bridge Plug Set: MD 7974'
TVD NA

21 Type Electric & Other Mechanical Logs Run (Submit copy of each)

CBL

22 Was Well cored? ☒ No ☐ Yes (Submit analysis)
Was DST run? ☒ No ☐ Yes (Submit report)
Directional Survey? ☒ No ☐ Yes (Submit copy)

23 Casing and Liner Record (Report all strings set in well)

| Hole Size | Size/Grade | Wt (#/ft) | Top (MD) | Bottom(MD) | State Cementer Depth | No. of Sks & Type of Cement | Slurry Vol (BBL) | Cement Top* | Amount Pulled |
|------------------------------|------------|-----------|----------|------------|-------------------------|--------------------------------|---------------------|-------------|---------------|
| | | | | | | | | | |
| REFER TO ORIGINAL COMPLETION | | | | | | | | | |
| | | | | | | | | | |

Accepted for record

NMOCD

24 Tubing Record

| Size | Depth Set (MD) | Packer Depth (MD) | Size | Depth Set (MD) | Packer Depth (MD) | Size | Depth Set (MD) | Packer Depth (MD) |
|--------|----------------|-------------------|------|----------------|-------------------|------|----------------|-------------------|
| 2-7/8" | 6624' | 6624' | | | | | | |

25 Producing Intervals

| Formation | Top | Bottom | Perforated Interval | Size | No Holes | Perf. Status |
|----------------|-------|--------|---------------------|------|----------|--------------|
| A) Bone Spring | 6696' | 6740' | 6696'-6740' | | 45 | Producing |
| B) | | | | | | |
| C) | | | | | | |

27. Acid, Fracture, Treatment, Cement Squeeze, Etc

| Depth Interval | Amount and Type of Material |
|----------------|---|
| 6696'-6740' | Acidized w/1500g 7-1/2% NEFE |
| | Frac w/148,205# 20/40 white sand, 50,500# Super LC sand, 2960 bbls 25# x-linked gel |
| | |

28 Production - Interval A

| Date First Produced | Test Date | Hours Tested | Test Production | Oil BBL | Gas MCF | Water BBL | Oil Gravity Corr API | Gas Gravity | Production Method |
|------------------------|---------------------|-----------------|--------------------|------------|------------|--------------|-------------------------|----------------|-------------------|
| 5/8/12 | 5/11/12 | 24 | → | 25 | 140 | 25 | NA | NA | Flowing |
| Choke Size | Tbg. Press. Flwg | Csg. Press | 24 Hr Rate | Oil BBL | Gas MCF | Water BBL | Gas/Oil Ratio | Well Status | |
| NA | 390 psi | Packer | → | 25 | 140 | 25 | NA | Producing | |

28a Production-Interval B

| Date First Produced | Test Date | Hours Tested | Test Production | Oil BBL | Gas MCF | Water BBL | Oil Gravity Corr API | Gas Gravity | Production Method |
|------------------------|-------------------|-----------------|--------------------|------------|------------|--------------|-------------------------|----------------|-------------------|
| | | | → | | | | | | |
| Choke Size | Tbg Press Flwg | Csg Press | 24 Hr. Rate | Oil BBL | Gas MCF | Water BBL | Gas/Oil Ratio | Well Status | |
| | | | → | | | | | | |

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

28b Production - Interval C

| Date First Produced | Test Date | Hours Tested | Test Production → | Oil BBL | Gas MCF | Water BBL | Oil Gravity Corr API | Gas Gravity | Production Method |
|---------------------|-------------------|--------------|----------------------|---------|---------|-----------|-------------------------|-------------|-------------------|
| Choke Size | Tbg Press Flwg | Csg Press | 24 Hr Rate → | Oil BBL | Gas MCF | Water BBL | Gas/Oil Ratio | Well Status | |

28c Production - Interval D

| Date First Produced | Test Date | Hours Tested | Test Production → | Oil BBL | Gas MCF | Water BBL | Oil Gravity Corr API | Gas Gravity | Production Method |
|---------------------|-------------------|--------------|----------------------|---------|---------|-----------|-------------------------|-------------|-------------------|
| Choke Size | Tbg Press Flwg | Csg Press | 24 Hr Rate → | Oil BBL | Gas MCF | Water BBL | Gas/Oil Ratio | Well Status | |

29. Disposition of Gas (Sold, used for fuel, vented, etc.)

Sold

30. Summary of Porous Zones (Include Aquifers)

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

31 Formation (Log) Markers

| Formation | Top | Bottom | Description, Contents, etc | Name | Top |
|-----------|-----|--------|----------------------------|------------------------------|------------|
| | | | | | Meas Depth |
| | | | | REFER TO ORIGINAL COMPLETION | |

32 Additional remarks (include plugging procedure)

33. Indicate which items have been attached by placing a check in the appropriate boxes

- ☐ Electrical/Mechanical Logs (1 full set req'd)
 ☐ Geologic Report
 ☐ DST Report
 ☐ Directional Survey

☐ Sundry Notice for plugging and cement verification
 ☐ Core Analysis
 ☒ Other CBL

34 I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)*

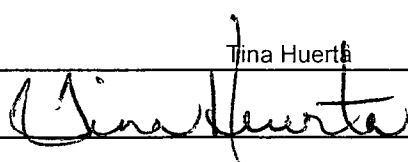
Name (please print)

Tina Huerta

Title

Regulatory Reporting Supervisor

Signature



Date

May 15, 2012

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

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