Form 3160-5 (September 2001)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD-AK	IESIA
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	FORM APPRO					
OMB No	1004	-0135				
Evnires Iam	iary 3	1. 2004				

which would entitle the applicant to conduct operations thereon.

SUNDRY NOTICES AND REPORTS ON WELLS

ALIG 1 4 2007 5. Lease Serial No

Do not use thi	s form for proposals to dri	ll or re enter an	AUG	7 2001	NM-82902		
abandoned well.	Use Form 3160-3 (APD) fo	r such proposals.	OCD-A	RTESIA	6. If Indian, Allotte N/A	e or Tribe N	lame
SUBMIT IN TRIPLIC	CATE - Other instr	uctions on reve	rse side		7. If Unit or CA/A	greement, N	ame and/or No.
1. Type of Well A Oil Well Gas	Well Other				8. Well Name and	d No.	
2. Name of Operator					DOMINO A	OJ FEDĖ	RAL #2
Yates Petroleum Corporation				9. API Well No.			
3a. Address 3b. Phone No. (include area code) 105 S. 4th Str., Artesia, NM 88210 505-748-1471					30-015-281		
4. Location of Well (Footage, Sec., T., R., M.,			-17/1		10. Field and Poo SHUGART, YA	,	•
330' FSL & 2,210' FEL SECTION	NI 8-T10S-P31F I	INIT O			11. County or Pa		EW MEXICO
12. CHECK APPROPR			JRE OF NO	OTICE RE			
TYPE OF SUBMISSION			TYPE OF				
	Acidize	Decpen		Production (S			er Shut-Off
X Notice of Intent	Alter Casing	Fracture Trea	,,	Reclamation	tart/ Resume)		Integrity
	Casing Repair	New Constru		=			EXTEND
Subsequent Report			<u> </u>	Recomplete		LJ	
	Change Plans	Plug and Aba	indon	Temporarily I	Abandon	<u>1A</u>	STATUS
Final Abandonment Notice	Convert to Injection	Plug Back	<u> </u>	Water Dispos	al		
following completion of the involved operations testing has been completed. Final Abandonme determined that the site is ready for final inspect. Yates Petroleum Corporation well for future use as a salt with the site is ready for final inspect.	ent Notices shall be filed only a tion) I respectfully reques	fter all requirements, includ	ling reclamation, h	nave been compli	eted, and the operat	or has	this
MIT was conducted on 8/3/04	4. Witnessed by Do	n Cleghorn.			ACCEPT	ED FOR	RECORD
Agricultus - 8	2 Month Period	<u>.</u>			Gerry Guve.	G 15 20 Deputy Fi	ald Ingress
Osta 2%		~19\$\$			MMOCD-D	istrict []	I ARTESIA
14 I hereby certify that the foregoing is true	and correct	- ,					
Name (Printed/Typed) Susap _i S. Lopez		Title	Regulator	ry Complia	nce Tech.		
Signature SUSAN	Noses	Date	July 31, 2	· · · · · · · · · · · · · · · · · · ·			
	THIS SPACE(OR FEDERAL OR	STATE OFFI	CE USE	1 DDR	OVE	4
Approved by			Title	1	Da	te	
Conditions of approval, if any, are attached. certify that the applicant holds legal or equivalent which would entitle the applicant to conduct or the conduct of the condu	table title to those rights in		Office	Ì	AUG	10 20	101

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 health led States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

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