Form 3160-5 (August 2007)

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

OCD-ARTESIA

FORM APPROVED OMB No 1004-0137

## SUNDRY NOTICES AND REPORTS ON WELLS



Expires July 31, 2010 5 Lease Serial No.

Do not use this form for proposals to drill or to re-enter an		NM-9187
abandoned well. Use Form 3160-3 (APD) for such proposals.		6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE - Other instructions on page 2.		7. If Unit or CA/Agreement, Name and/or No.
1 Type of Well Oil Well X Gas Well Other	NOV 26 2007	8 Well Name and No
2 Name of Operator OCD_APTERIA		Box Canyon Unit #5
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		30-015-33155
4 Location of Well (Footage, Sec., T., R., M., OR Survey Description)		10. Field and Pool or Exploratory Area Little Box Canyon; Strawn
25 Control of the first of the		11 County or Parish, State
1800'FNL & 800'FEL of Section 24-T21S-R21E (Unit H, SENE)		Eddy County, New Mexico
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION TYPE OF ACTION		
Acidize	= = = = = = = = = = = = = = = = = = = =	(Start/Resume) Water Shut-Off
Notice of Intent Alter Casing	Fracture Treat Reclamation	
X Subsequent Report Casing Repair	New Construction Recomplet	Other Name
Change Plans	Plug and Abandon Temporan	ly Abandon Change
Final Abandonment Notice Convert to Injection	Plug Back Water Dis	oosal
Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.  Former Wellname: Box Canyon Unit #5  New Wellname: Box Canyon BKY Federal #5		
14. I hereby certify that the foregoing is true and correct		
Name <i>(Printed/Typed)</i> Tina Hu <b>ę</b> rta ի	Title Regulatory Compl	iance Supervisor
Signature ( \lambda in a ) \lambda in table = November 9, 2007		
ACCEPTED FOR RECORD THIS SPACE FOR FEDERAL OR STATE OFFICE USE		
Approved b/S/DAVID.R.GLASS	Title	Date
Conditions of approval of approval of this notice does not war certify that the applicant holds legal or equitable title to those rights in the subject which would enlittle the applicant to conduct operations thereon	rant or ct lease Office	
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for a	any person knowingly and willfully to mak	e to any department or agency of the United States