

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Artesia

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.***SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No NMNM57274
2. Name of Operator YATES PETROLEUM CORPORATION		6. If Indian, Allottee or Tribe Name
3a. Address 105 SOUTH FOURTH STREET ARTESIA, NM 88210		7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No (include area code) Ph: 575-748-4168 Fx: 575-748-4585		8. Well Name and No HARACZ AMO FED 2H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 24 T24S R31E SESW 500FSL 1650FWL 32.197374 N Lat, 103.733625 W Lon		9. API Well No 30-015-36355-00-X1
		10. Field and Pool, or Exploratory COTTON DRAW
		11. County or Parish, and State EDDY COUNTY, NM

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

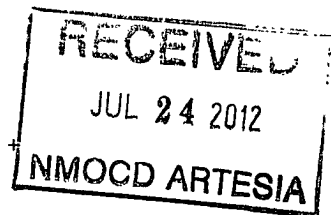
TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> 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 checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<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 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.)

6/21/12 - Resumed drilling at 7:00 PM.

6/22/12 - TD 17-1/2" hole to 711'. Set 13-3/8" 48# J-55 ST&amp;C casing at 711'. Cemented with 780 sx Class "C" + 0.125#/sx D130 + 0.2% D46 + 3#/sx D42 (yld 1.34, wt 14.8). Circulated 360 sx to pit. Tested casing to 1200 psi for 30 min, good. WOC 25 hrs 15 min. Reduced hole to 12-1/4" and resumed drilling.

6/29/12 - TD 12-1/4" hole to 4404' at 5:45 PM. Set 9-5/8" 36#, 40# J-55 HCK-55 LT&amp;C casing at 4404'. Cemented with 1170 sx 35:65:6 Poz "C" + 0.3% D112 + 0.125#/sx D130 + 6% D020 + 5#/sx D042 + 5% D044 + 0.2% D046 (yld 1.99, wt 12.8). Tailed in with 360 sx 50/50 Poz "C" + 0.125#/sx D130 + 0.2% D201 + 5#/sx D042 + 5% D044 + 0.2% D046 + 0.2% D065 (yld 1.37, wt 14.2). Circulated 395 sx to pit. Tested casing to 1500 psi for 30 min, good. WOC 34 hrs 10 min. Reduced hole to 8-3/4" and resumed drilling.

Accepted 8/28/12  
Accepted for record

NMOCD

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #142790 verified by the BLM Well Information System For YATES PETROLEUM CORPORATION, sent to the Carlsbad Committed to AFMSS for processing by DEBORAH MCKINNEY on 07/13/2012 (12DLM1277SE)	
Name (Printed/Typed) TINA HUERTA	Title REG REPORTING SUPERVISOR
Signature (Electronic Submission)	Date 07/12/2012

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By <b>ACCEPTED</b>	JAMES A AMOS Title SUPERVISOR EPS	Date 07/22/2012
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 Carlsbad

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.

**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\***