Form 3160-5 (Aegust 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED OMB NO. 1004-0135 010

	OMB NO. 1004-01
	Expires: July 31, 20
5.	Lease Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS

NMNM102028

Do not use the abandoned we	,	6. If Indian, Allottee or Tribe Name					
SUBMIT IN TRI	PLICATE - Other instruc	tions on rev	erse side.	· ·	7. If Unit or CA/Agree	ment, Name and/or No.	
Type of Well	ner: UNKNOWN OTH		·		8. Well Name and No. MILTON BMF FED	DERAL COM 1H	
Name of Operator YATES PETROLEUM CORPORT	Contact: ORATIO NE -Mail: tinah@yate	TINA HUERT espetroleum.com	A n		9. API Well No. 30-015-36955		
3a. Address 105 SOUTH FOURTH STREE ARTESIA, NM 88210	ΞT	3b. Phone No. Ph: 575-74 Fx: 575-748)	10. Field and Pool, or I WILDCAT, WOL		
4. Location of Well (Footage, Sec., 7	., R., M., or Survey Description	,			11. County or Parish, a	nd State	
Sec 4 T16S R29E 4590FNL 1	00FEL				EDDY COUNTY	, NM	
12. CHECK APP	ROPRIATE BOX(ES) TO	O INDICATE	NATURE OF	NOTICE, RE	PORT, OR OTHER	R DATA	
TYPE OF SUBMISSION			TYPE O	F ACTION	•	· · · · · · · · · · · · · · · · · · ·	
☐ Notice of Intent	☐ Acidize	Deep	oen.	☐ Production	on (Start/Resume)	☐ Water Shut-Off	
-	☐ Alter Casing	☐ Frac	ture Treat	□ Reclama	tion	■ Well Integrity	
☐ Subsequent Report	☐ Casing Repair ☐ Change Plans	. —	Construction	□ Recompl	·		
Final Abandonment Notice		and Abandon		rily Abandon	tice		
	☐ Plug			er Disposal ny proposed work and approximate duration			
following completion of the involved testing has been completed. Final A determined that the site is ready for form of the state of the	bandonment Notices shall be fil inal inspection.) respectfully requests fina	ed only after all i	equirements, includent approval and	ding reclamation	have been completed, a	J-4 shall be filed once and the operator has	
		<u>,</u>		P.Ccepte	ed for record MOCD R.L.B.		
14. I hereby certify that the foregoing i	s true and correct. Electronic Submission # For YATES PETRO	348519 verifie OLEUM CORP	d by the BLM We DRATION, sent	ell Information to the Carlsba	System d		
Name (Printed/Typed) TINA HUI	ERTA		Title REG R	EPORTING S	SUPERVISOR		
Signature (Electronic	Submission)		Date 08/19/2	2016			
	THIS SPACE FO	OR FEDERA	L OR STATE	OFFICE US	SE .		
Approved By Conditions of approval, if any, are attached certify that the applicant holds legal or equal to			Title S	ET		10-5-1L Date	
which would entitle the applicant to cond Title 18 U.S.C. Section 1001 and Title 43	uct operations thereon.		Office CF	d willfully to ma	ve to any department or	agency of the United	
States any false, fictitious or fraudulent					ce to any department of	agency of the Office	

			٥	Daubenmire Summary		
Study Number	Н			Pasture:	Date: 6/	6/26/2014
Study Location	Milton BMF	F #1H		Examiner: David & Allie		
		Reclama	Reclamation Site			
Cover Class	Mid-Point	Number	Product	Plot Area	m^2	
1 1-5%	2.5		0			
2 5-25%	. 15		0	Recover Ratio 134	%	
3 26-50%	37.5		0			
4 51-75%	62.5	, - 1	62.5	Location: 4590 FNL & 100 FEL		
2 76-95%	85	4	340	Section 4, T16S-R29E, Eddy County, NM	unty, NM	
6 96-100%	97.5	3	292.5			
Total Canopy			695	Lease # NM-102028		
Number of Quadrants			8	API # 30-015-36955		•
Canopy Density	•		87	%		

. Reference Site

									%
Product	0	15	0	62.5	85	97.5	260	4	65
Number		-		-	_	-	,		
Mid-Point	2.5	15	37.5	62.5	85.	97.5			
Cover Class	1-5%	5-25%	79-20%	51-75%	76-95%	96-100%	Fotal Canopy	Number of Quadrants	Canopy Density
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