Form 3160-5 (April 2004)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

FORM APPROVED OMB No. 1004-0135 Expires March 31, 2007

SUNDRY NC Do not use th abandoned well.	OTICES AND REPORT is form for proposals to dri . Use Form 3160-3 (APD) fo	I or reedler an RECEIVE r such proposals. Q OCD - ART	0 45678 ESIA 78	5. Lease Serial No. LC-067832-A 6. If Indian, Allottee	or Tribe Name	
SUBMIT IN TRIPLI	CATE - Other instru	uctions on reverse sid	de No	7. If Unit or CA/Agre	ement, Name and/or No.	
1. Type of Well Oil Well X Gas Well Other					NMNM-106836 8. Well Name and No.	
2. Name of Operator					West Indian Basin Unit #2	
Yates Petroleum Corporation 3a. Address 3b. Phone No. (include area code)					9. API Well No. 30-015-10282	
3a. Address 105 S. 4th Str., Artesia, NM	505-748-1471					
4. Location of Well (Footage, Sec., T., R., M., OR Survey Description)				10. Field and Pool, or Exploratory Area Indian Basin Upper Penn		
	11. County or Parish, State					
1980'FNL & 1650'FEL of Section 20-T21S-R23E (Unit G, SWNE)				Eddy County, New Mexico		
12. CHECK APPROPI	RIATE BOX(ES) TO I	NDICATE NATURE O	F NOTICE, RE			
TYPE OF SUBMISSION		TYPE	OF ACTION	1 1		
Notice of Intent X Subsequent Report Final Abandonment Notice 13. Describe Proposed of Completed Operation (cl If the proposal is to deepen directionally or reconstant that the Bond under which the work will be following completion of the involved operations testing has been completed. Final Abandonm determined that the site is ready for final inspect	omplete horizontally, give subsurf performed or provide the Bond N s. If the operation results in a m nent Notices shall be filed only al	ace locations and measured and true to on file with BLM/BIA. Required ultiple completion or recompletion in	Reclamation Recomplete Temporarily Water Dispos proposed work and app vertical depths of all pe subsequent reports shall a new interval, a Form 3	proximate duration there erlinent markers and zor Il be filed within 30 da 3160-4 shall be filed or	nes. nys. nce	
Former Wellname: West In	dian Basin Unit #2					
New Wellname: West In	dian Basin Federal (Com #2	AL	PTED FOR R AUG 2 5 200 EXIS C. SWOR ROLEUM ENGI	06 ODA	

14. I hereby certify that the foregoing is true and correct				
Name (Printed/Typed)				
Tina Huerta	itle Regulatory Compliance Sup-	Regulatory Compliance Supervisor		
	Pate August 17, 2006 RAL OR STATE OFFICE USE			
Approved by	Title	Date		
Conditions of approval, if any, are attached. Approval of this notice does not warrar certify that the applicant holds legal or equitable title to those rights in the subject which would entitle the applicant to conduct operations thereon.		Azq.		