Form 3160-5 (September 2001)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SLINDRY NOTICES AND REDORTS ON WELLS

345678970772 FORM APPROVED OMB No. 1004-0135 Expires January 31, 2004

Do not use thi	is form for proposals to dril. Use Form 3160-3 (APD) for			Lease Serial No. MLC028990 findian, Allottee		
	CATE - Other instru	ıctions on reverse sid	Ne 👸	/	eement, Name and/or No.	
1. Type of Well Oil Well X Gas	Well Other	15.000	15 55 75 25 25 25 25 25 25 25 25 25 25 25 25 25	32575 8. Well Name and I	No.	
2. Name of Operator			~	Creek AL Fed	deral Com #19	
Yates Petroleum Corporation					9. API Well No.	
3a. Address 3b. Phone No. (include area code)					30-015-32896	
105 S. 4th Str., Artesia, NM 88210 505-748-1471 4. Location of Well (Footage, Sec., T., R., M., OR Survey Description)					10. Field and Pool, or Exploratory Area	
4. Location of vveil (Footage, Sec., I.,R.,M., OR Survey Description)					Hackberry Morrow, North 11. County or Parish, State	
1402'FNL and 859'FWL of Section 25-T18S-R30E (Unit E, SWNW)				Eddy County, New Mexico		
		NDICATE NATURE O				
TYPE OF SUBMISSION		TYPE	OF ACTION			
If the proposal is to deepen directionally or reconstruction Attach the Bond under which the work will be following completion of the involved operations testing has been completed. Final Abandonis determined that the site is ready for final inspection. 9/29/03 Set 9-5/8" 36# & 40# 0	Acidize Deepen Production (Start/Resume) Water Shut-Off Alter Casing Alter Casing Fracture Treat Reclamation Well Integrity Casing Repair New Construction Recomplete Change Plans Plug and Abandon Temporarily Abandon Casing Convert to Injection Plug Back Water Disposal Learly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof, complete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. The operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once nent Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has ction.) Casing at 4030'. Cemented with 1300 sx Hal Lite Premium Plus Poz A with additives. Premium Plus with additives. Cement circulated to surface. WOC					

14. I hereby certify that the foregoing is true and correct				
Name (Printed/Typed)				
Tina Huerta	Title	Regulatory Compliance Supervisor		
Signature Jim Hurta	Date	October 1, 2003		
THIS SP	ACE FOR FEDERAL O	R STATE OFFICE USE		
Approved by		Title	Date	
Conditions of approval, if any, are attached. Approval of this notic certify that the applicant holds legal or equitable title to those rigi which would entitle the applicant to conduct operations thereon.	Office			
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make	e it a crime for any person	knowingly and willbully to make	e to any department or agency of the United	
States any faise, fictitious or fraudulent statements or representation	ns as to any matter within its	s jurisdiction		