

**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.

5. Lease Serial No.

NM-0559175

6. If Indian, Allottee or Tribe Name

NA

**SUBMIT IN TRIPLICATE - Other instructions on page 2.**

7. If Unit or CA/Agreement, Name and/or No.

NMNM-111025X

1. Type of Well

Oil Well  Gas Well  Other P&A

8. Well Name and No.

NDDUP Unit #133

2. Name of Operator

Yates Petroleum Corporation

9. API Well No.

30-015-28050

3a. Address

105 S. 4th Str., Artesia, NM 88210

3b. Phone No. (include area code)

575-748-1471

10. Field and Pool or Exploratory Area

Dagger Draw; Upper Penn, North

4. Location of Well (Footage, Sec., T., R., M., OR Survey Description)

660'FSL & 660'FWL of Section 29-T19S-R25E (Unit M, SWSW)

11. County or Parish, State

Eddy County, New Mexico

**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 type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input checked="" type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<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 recomplete 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 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.

**RECEIVED**  
NOV 19 2010  
NMOCD ARTESIA

- 10/22/10 NU BOP.
- 10/26/10 RIH with GR/JB. Set a 7" CIBP at 7600'. Loaded and tested casing. Circulated salt gel. Spotted 30 sx Class "H" Neat cement. Calc TOC at 7435'. Spotted 40 sx Class "C" Neat cement at 6078'. Calc TOC at 5832'.
- 10/27/10 Tagged cement plug at 5845'. Pumped 35 sx Class "C" Neat cement at 5550'. Est TOC at 5335'. Did not have to tag. Pumped 25 sx Class "C" Neat cement at 3406'. Est TOC at 3252'. Did not have to tag. Perforated 4 holes at 2272'. Pressured casing to 500 psi, held good. Pumped 40 sx Class "C" cement at 2332'. WOC 4 hrs. Tagged plug at 2100'. Perforated 4 holes at 1210'. Pressured casing to 500 psi, held good. Spotted 45 sx Class "C" Neat cement at 1277'. WOC 4 hrs. Tagged cement plug at 990'. Perforated 4 holes at 980' as per BLM. Pressured casing to 700 psi, held good. Pumped 25 sx Class "C" Neat cement at 990'. Est TOC at 836'. Did not have to tag. Perforated 4 holes at 150'. Established circulation up 7" x 9-5/8", pumped 46 sx Class "C" cement to surface. ND BOP.
- 11/2/10 Dug out cellar and cut off wellhead. Installed dry hole marker. Filled cellar and cut anchors. Cleaned location. **WELL IS PLUGGED AND ABANDONED.**

**Accepted as to plugging of the well bore.  
Liability under bond is retained until  
Surface restoration is completed.**

14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed)

Tina Huerta

Title Regulatory Compliance Supervisor

Signature

*(Signature)*

Date

November 4, 2010

**ACCEPTED FOR RECORD**

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

NOV 14 2010

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

*(Signature)*  
CARLSBAD FIELD OFFICE

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

Reclamation Due 5-1-11

*(Handwritten mark)*