Approved by

applicant to conduct operations thereon.

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

TED STATES DEPARIMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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.

FORM APPROVED

OMB No. 1004-0135

Expires November 30, 2000

5. Lease Serial No.

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6. If Indian, Allottee or Tribe Name

Date

				7. if	f Unit or CA/Agreement, Name and/or No.			
SUBMIT	IN TRIPLICATE - C	ther Instructions	on reverse side					
1. Type of Well			6031-12396	8. W	/ell Name and No.			
Oil Well	X Gas Well	Other	1903, - 3486	FE	DERAL BZ COM ;#12			
Name of Operator				101	API Well No.			
Yates Petroleum Co	orporation /	lat Di . Ne Cert	N O PO	30-	015-21625			
3a Address 105 S. 4th Street - A	Artosia NM 88210	3b. Phone No. (include) 505-748-1471	ne area codey / C C C C C C C C C C C C C C C C C C		Field and Pool, or Exploratory Area GLE CREEK/ STRAWN PERMO			
4. Location of Well (Footage, Se			39,00	₩ PE				
SECTION 21-T17S-R25E	1980' FSL & 1980' FW		CONTINUE BEDORT	N/ 111. (County or Parish, State DY, NEW MEXIC()			
12 CHECK A	PPROPRIATE BOX(ES	S) TO INDICATE NAT	URE OF NOTICE, REPORT	OR OTH				
TYPE OF SUMISSION		<u>, , , , , , , , , , , , , , , , , , , </u>	TYPE OF ACTION	,				
Notice of Intent	Acidize	Deepen	Production (Start/Resume)	Wate	er Shut-Off			
X Subsequent Report	Alter Casing	Fracture Treat	Reclamation		Well Integrity			
Final Abandonment Notice	Casing Repair	New Construction	Recomplete	Othe	er			
	Change Plans	Plug and Abandon	X Temporarily Abandon					
	Convert to Injection	Plug Back	Water Disposal					
directionally or recomplete horizor or provide the Bond No. on file wit completion or recompletion in a ne reclamation, have been completed 5-29-02- SITP slight blow Set down @ top of sliding 5-30-02- RU wireline; TIH wireline; Set CIBP @ 736 5-31-02- TIH w/ tubing op	ntally, give subsurface locations are hBLM/BIA. Required subsequent winterval, a Form 3160-4 shall bit, and the operator has determined; casing valve was open. It is sleeve @ 7327'. Tubing the winterval, and the operator has determined to strip gun. TOH, pump 4' cap w/ 35' cement (66) en ended to 6250'. Tested	id measured and true vertical de reports shall be filed within 30 de filed once testing has been con that the site is ready for final institution. The tree; NU BOP. Packe free @ 7015'; some mov down tubing. Work tubin 30'). Cap w/ 35' cement (dicasing to 500 psi. Disp.	er would not release; no travel in	Attach the Bond operations. If the ill be filed only a in tool. RU v vn. TOH, sli in. I corrosion st chart atta	d under which the work will be performed the operations results in a multiple after all requirements, including wireline; run free poir t. ding sleeve opened. RU inhibitor. Tested & chart ached. Well is T/A.			
I hereby certify that the foregoing	is true and correct		1					
Name (Printed/Type	d)		Title					
Donna Clack	^		Operations Technician					
Signature	6 (On1)	*	Date 6-4-02					

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Title

Office



