Form 3160-5 (June 1990)

Accepted for record

Only / // 02

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

Oil Cons. N.M. DIV-Dist. 2

ringly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements

FORM APPROVED

1301 W. Grand Aventuder Bureau No. 1004-0135 Artesia, NM 88210 Expires: March 31, 1993

Designation and Serial No.

LC 063567 SUNDRY NOTICES AND REPORTS ON WELLS 6. If Indian, Allottee or Tribe Name Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT-" for such proposals 7. If Unit or CA, Agreement Designation SUBMIT IN TRIPLICATE 1. Type of Well Oil Well 8 Well Name and No. Other Yates Federal #4 2. Name of Operator 9. API Well No. Guadalupe Operating L.L.P. 30-015**-**0103**7** 3 Address and Telephone No. 10. Field and Pool, or Exploratory Area 1401 W. Cuthbert, Midland, TX 79701 McMillan(7-Rivers Queen) 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) OCD - ARTESIA 11. County or Parish, State 330' FN1 & 330' FWL Sec. 8, T-20-S, R-27-E Eddy CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF ACTION TYPE OF SUBMISSION Change of Plans Abandonment Notice of Intent New Construction Recompletion Non-Routine Fracturing Plugging Back Subsequent Report Water Shut-Off Casing Repair Conversion to Injection Final Abandonment Notice Altering Casing Dispose Water Other (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)* 10-18-01 Set 7" CIBP @ 490'. 10-18-01 Mix & pump mud. 10-18-01 Spot 40 sx cmt. on CIBP @ 490'. 10-18-01 Perf 4 holes @ 200', set pkr. @ 30', pump 70 sx cmt. to surface behind 7", leave 7" full of cmt. Install dry hole marker. Appreved to to of aging of the well bord. Lietally usees were to relained und surface restoration is competed. 14. I hereby certify that the foregoing strue and correct 10/23/01 Agent (This space for Federal or State office use) Approved by ______ if any

See Instruction on Reverse Side