Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

Lease Designation and Serial No.

BUREAU OF LAND MANAGEMENT		5. Lease Designation and Serial No. NM 54298
Do not use this form for proposals to dri	AND REPORTS ON WELLS II or to deepen or reentry to a different reservoir. R PERMIT—" for such proposals	6. If Indian, Allottee or Tribe Name
	IN TRIPLICATE	7. If Unit or CA, Agreement Designation
1. Type of Well		
Oil KX Gas Other		8. Well Name and No.
2. Name of Operator	(505) 7/0 1/71)	Amaranth AMG Federal Com #1
YATES PETROLEUM CORPORATION (505) 748-1471)		30-015-27375
3. Address and Telephone No.		10. Field and Pool, or Exploratory Area
105 South 4th St., Artesia, NM 88210 4 Location of Well (Footage, Sec. T., R., M., or Survey Description)		Undesignated Atoka
4 Location of Wen (Poolage, Sec. 1., R., M., of Survey Description)		11. County or Parish, State
Unit B, 1310' FNL & 2630' FEL,	, Sec. 12-T20S-R30E - Surface	1 4 4 5 C C C C C C C C C C C C C C C C C
Unit F, 2449' FNL & 1512' FWL	, Sec. 12-T2OS-R3OE - Proposed BHL	Eddy County, NM
12 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPO	RT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
	Abandonment	Change of Plans
X Notice of Intent	X Recompletion	New Construction
J Subsequent Report	Plugging Back	Non-Routine Fracturing
C J Subsequent Report	Casing Repair	Water Shut-Off
Final Abandonment Notice	Altering Casing	Conversion to Injection
1 I mai Abandon lem Protice	Other	Dispose Water
	Ill pertinent details, and give pertinent dates, including estimated date of starting	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
Propose to recomplete to Ato 1. Run static BHP. TIH wi at 12350'. 2. Load tubing and annulus. into hanger. Remove BPV and 3. TIH with REP & packer. Nipple down BOF and nipple u	Install BPV in tubing hanger. Instableed gas off tubing. Get off on/of: Set RBP at 12100' and test to 2000 ps.	all BOP. Stab lift joint f tool. i. Set packer at 11800'. ary. Swab test. Will acidize as
14 I hereby certify that the foregoing is my and correct Signed Using		Date Dec. 27, 1995
(This space for Federal or State office use) Approved by	Title	Date 1/25/96
Conditions of approval, if any:		

Fitle 18 U.S.C. Section 1001, makes 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.