Form 3160-5 (November 1994)	UNITED DEPARTMENT OF BUREAU OF LAND	THE INTERIOR	N.M Oi. 311 S. 1st St Artesia, NM	PRS. Division APPROVED Budget Bureau No. 1004-0135 Expires July 31, 1996 88210-2834 5. Lease Serial No.
S	UNDRY NOTICES AND	REPORTS ON WE	LLS	NM 58929
Do r abar	not use this form for propo adoned well.Use Form 316	sals to drill or to re-e 60-3 (APD) for such p	enter an proposals.	6. If Indian, Allottee or Tribe Name
SUBMIT IN T	TRIPLICATE - Other Inst	ructions on reverse si	ide	7. If Unit or CA/Agreement, Name and/or No.
1. Type of Well				
X Oil Well	Gas Well	Other		8. Well Name and No.
2. Name of Operator				Pita 4 Federal No. 1
	URCES OIL AND GAS	COMPANY - Debor	ah Magness	9. API Well No.
3a. Address	31	b. Phone No. (include an	rea code)	30-015-28706
P. O. Box 51810, Midlar		915/688-9	012	10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, 1980' FNL & 1780' FEL, S	Sec. 4, T20S, R29E		MAR 1000	Undesignated Burton Yates 11. County or Parish, State Eddy, NM
12. CHECK	APPROPRIATE BOX(ES) T	O INDICATE NATUR	SOENOTICE, REI	ORT, OR OTHER DATA
TYPE OF SUBMISSION		TYI	E AL ACTION	
	Acidize	Deepen	Froduction	(Start/Resume) Water Shut-Off
Notice of Intent	Alter Casing	Fracture Treat	Reclamatio	n Well Integrity
X Subsequent Report	Casing Repair	New Construction	X Recomplete	Other
Final Abandonment Notice	Change Plans	Plug and Abandon	Temporari	y Abandon
13. Described Proposed or Complet	Convert to Injection	Plug Back	Water Disp	mosed work and approximate duration thereof. If the

13. Described 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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Burlington Resources Oil and Gas Co. plugged back Delaware perfs and recompleted in the Burton Yates pool as follows:

2/9/98: MIRU.

2/10/98:	TIH w/ bit and scraper. Circ hole clean	. Set CIBP at 5340'.	Capped w/ 30' cement.	Could not pull csg off slips.	Cut
	$5\frac{1}{2}$ " csg at 3400'. TOC = 3500' by T.S	S.	••	r opoi	

2/11/98: Ran csg recovery log from 3430' to surface. TOC = 2800'. Cut csg at 2740'. Tested annulus—holding. Pumped 135 sxs Class C Neat over csg stub. Cement calculated to cover 3665' - 2680'.

2/12/98: Tagged cement at 2452'.

2/13/98: Tried unsuccessfully to test tbg. Squeezed casing leak w/ 300 sxs C Neat + 3% CACL. Left 75' cmt on top of retainer.

2/14/98: Ran 9 5/8" csg bond log. No cmt from 1347' to 1980'. TOC = 924'.

2/17/98: Perf'd 1315' - 1325', 1327' - 1335' w/ 2 spf. Acdz w/ 2500 gals 15% Ferchek. Swabbed dry.

2/19-20/98: Swabbed dry	. Released packer and pulled tubing.	Shut in for evaluation. O	Open perfs: 1315' - 1335' (Burton Yate	s).
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14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) Deborah Magness	Title	e Regulatory Assistant		
Signature Marina	Date			
ACCEPTED FOR RECUNU THIS SPACE FOR FEDERAL OR STATE OFFICE USE				
Approved (ORIG SCD.) DAVID & GLASS	Title	Date		
Conditions of approval, if any, are attached. Approva 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			
Title 18 U.S.C. Section 100 ¹² makes it a crime for any person knowingly and willfully or fraudulent statement or representations as to any matter within its jurisdiction.	to make to an	any department or agency of the United States any false, fictitious		
(Instructions on reverse)				