Form 3160-5 (August 1999)

## **UNITED STATES** DEPARTMENT 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, 200
Expires receiliber 30, 200

		OMB No. 1004-0135 Expires November 30, 2000						
	5.	Lease Serial No.						
		NM-043625						
	6.	If Indian, Allottee or Tribe Name						
**	7.	If Unit or CA/Agreement, Name and/or No.						
8. Well Name and No.								
	5	Saguaro AGS Federal #11						

SUBMIT IN TR	7. If Unit or CA/Agreement, Name and/or No.						
1. Type of Well							
🔯 Oal Well 🔲 Gas Well 🗌	8. Well Name and No.						
2. Name of Operator	Saguaro AGS Federal #11						
Yates Petroleum Cor	poration				9. API Well	No.	
3a. Address 105 South Fo	ourth Street	3b. Phone	No. (include area	code)			
Artesia, Nev		10. Field and Pool, or Exploratory Area					
4. Location of Well (Footage, Sec.	, T., R., M., or Survey Description	on)			Deper 1	agger Draw enn	
1980' FSL and 1980'	FWL				11. County o	r Parish, State	
Section 11, T20S-R2	24E						
					<del></del>	ounty, New Me	X1CO
12. CHECK AP	PROPRIATE BOX(ES) T	O INDICAT	E NATURE (	OF NOTICE, R	EPORT, OR	OTHER DATA	
TYPE OF SUBMISSION			TYPE C	OF ACTION			
	Acidize	Deepen		Production (Star	t/Resume) [	☐ Water Shut-Off	
Notice of Intent	Alter Casing	Fracture	_	Reclamation		Well Integrity	
	Casing Repair	<del></del>	nstruction	Recomplete	1	Other EXTENI	) APD
Subsequent Report	Change Plans		Abandon 🔲	Temporarily Ab	oandos:		<u></u>
Final Abandonment Notice	Convert to Injection	Plug Bac	_	Water Disposal			
13. Describe Proposed or Complete							
Yates Petroleum Conone (1) year Apri		o extend	the capti	oned well'	s APD exp	piration date	for
Thank you.				. 0			
,	For	in Agricultural Control	Approved I	for 12 4/1/2601	Miller Park	×i	en en en en
		1.00	4	4/1/2001			
			Endry	1112001	, 7 > mm/1500	***	
		5.					
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14. I hereby certify that the foregoi	ng is true and correct						
Name (Printed/Typed)							
Jamie Savoie			Title Regulatory Technician				
Signature () (mil	Savore		Date 3/1	4/00			
	THIS SPACE	FOR FEDER	RAL OR STAT	E OFFICE USE	<b>5</b>		
Approved by	14 560.) JOE 6. L	ARA	Title	Palmiaum	Da	te 10/20/2	2CO
Conditions of approval, if any, are	attached, Approval of this no	tice does not wa	arrant or				
certify that the applicant holds leg	al or equitable title to those rig	ghts in the subj	ect lease Office	CFC			

which would entitle the applicant to conduct operations thereon.