Form 3160-5 (August 1999)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT



FORM APPROVED OMB No. 1004-0135

| | Expires | Nove | mber | 30, 2 |
|-------|----------|------|------|-------|
| Lease | Serial N | 0. | | |

| 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 CEIVED OCD - ARTESIA | | | | | | NM-0 If Indian | | 76 Ottee or Tribe Name | |
|---|---|--|-----------------------------------|------------------|-----------------------------|-------------------|--------|--|-------------|
| - プイン・ター・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・ | PLICATE - Other Instr | A STATE OF THE STA | reverse s | | Mark Control of the Control | If Unit o | r CA/ | Agreement, Name and/o | or No. |
| (X) Oil Well Gas Well | Other | | | | 8. | Well Na | ıme aı | nd No. | |
| 2. Name of Operator | | . | | | | Diamo | nd . | AKI Federal # | 3 |
| Yates Petroleum Co | | · | | | 9. | API We | | | |
| ł . | | | 3b. Phone No. (include area code) | | | 30-01 | | | |
| Artesia, New Mexico 88210 (50) 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) | | | 748-1471 | | | | | ol, or Exploratory Area | |
| 2217' FSL and 2013 1650' FSL and 1980 Section 34, T20S-1 | 3' FWL Surface Loc O' FWL Bottom Hole | ation | on | | 1. | 1. County | or Par | w Upper Penn rish, State y, New Mexico | |
| 12. CHECK AP | PROPRIATE BOX(ES) T | O INDICAT | E NATURE | OF NOT | TICE, REPO | ORT, OF | TO S | HER DATA | |
| TYPE OF SUBMISSION | | | | OF ACIT | | ···· | | | |
| Notice of Intent | Acidize Alter Casing Casing Repair | Deepen Fracture New Co | Treat | Product Reclam | | rt/Resume) | | Water Shut-Off Well Integrity Other EXTEND A | ADD |
| Subsequent Report | Change Plans | _ | Abandon | | rarily Abando | n . | XI | Other BRIDING 71 | |
| Final Abandonment Notice | Convert to Injection | Plug Bac | | | Disposal | | | | |
| Yates Petroleum Codate for one (1) y | al Abandonment Notices shall for final inspection.) Orporation wishes year to August | to exten | fter all requirer | octioned | ding reclamat | APD | exp: | iration | Parator has |
| 14. I hereby certify that the foregoin Name (Printed/Typed) Jamie Sa | | | Title Re | gulatoi | ry Techn | ician | | | |
| Signature \\\\/\lambda_1\lambda_1\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | LUNOCL | | Deta | | | | | · | |
| - June | THIS SPACE | FOR FEDER | | une 15 | NA OVERSANAL STOCKER | | | | ing in |
| Approved by Conditions of approval, if any, are cert fy that the applicant holds legs which would entitle the applicant to | attached. Approval of this not | ice does not w | Title | P • • • • | | D | ate | 10/30/2000 | |
| out o applicant to | consuct operations dicicon. | | ŀ | | <u>_</u> | | | | |

RECEIVED
JUN 27 2000
BLM
ROSWELL, NM