

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM Oil Cons. DIV-Dist 2

FORM APPROVED
OMB NO. 1004-0135
Expires: November 30, 2000**SUNDRY NOTICES AND REPORTS ON WELL**
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.
Grand Avenue
Artesia, NM 88210**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM28171	
2. Name of Operator YATES PETROLEUM CORPORATION		6. If Indian, Allottee or Tribe Name	
3a. Address 105 S. 4TH ARTESIA, NM 88210		7. If Unit or CA/Agreement, Name and/or No.	
3b. Phone No. (include area code) Ph: 505-748-4168 Fax: 505-748-4585		8. Well Name and No. SPEAR OA FED 6	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 9 T9S R26E NWNE 660FNL 1980FEL <i>UT. B</i>		9. API Well No. 30-005-63392-00-S1	
		10. Field and Pool, or Exploratory UNDESIGNATED <i>Far Ranch Wolfcamp</i>	
		11. County or Parish, and State CHAVES COUNTY, NM	

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe 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 recompletable 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 recompletable 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.)

Yates Petroleum Corporation plans to Recomplete this well to the Wolfcamp. CIBP at 6010' w/20' cement. Set RBP at 5450' +/- Perforate Wolfcamp 5396'-5408'(48) for a total of 48 holes. Stimulate as needed. If the Wolfcamp production is low, set a 4-1/2" composite plug at 5300' +/- and perforate Abo 4373'-4377'(5), 4401'-4409'(9), 4441'-4445'(5), 4450'-4454'(5), 4518'-4522'(5), 4526'-4529'(4), 4634'-4644'(11), 4710'-4722'(13), 4746'-4752'(7), 4782'-4789'(8) for a total of 72 holes. Stimulate as needed. Plan to commingle this well when DHC approval is received.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #18362 verified by the BLM Well Information System For YATES PETROLEUM CORPORATION, sent to the Roswell Committed to AFMSS for processing by Linda Askwig on 02/10/2003 (03LA0037SE)	
Name (Printed/Typed) TINA HUERTA	Title REG COMPLIANCE SUPERVISOR
Signature (Electronic Submission)	Date 02/07/2003

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By <u>ARMANDO A LOPEZ</u>	Title <u>PETROLEUM ENGINEER</u>	Date <u>02/11/2003</u>
Conditions of approval, if any, are attached. Approval 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 <u>Roswell</u>

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make 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.

**** REVISED ** REVISED ** REVISED ** REVISED ** REVISED ** REVISED ** REVISED ** REVISED ****

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102
Revised August 15, 2000

Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-005-63392	² Pool Code 76750	³ Pool Name Foor Ranch Wolfcamp Gas
⁴ Property Code 12766	⁵ Property Name Spear OA Federal	⁶ Well Number 6
⁷ OGRID No. 025575	⁸ Operator Name Yates Petroleum Corporation	⁹ Elevation 6340' GR

¹⁰ Surface Location

UL or lot no. B	Section 9	Township 9S	Range 26E	Lot Idn	Feet from the 660	North/South line North	Feet from the 1980	East/West line East	County Chaves
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¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
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¹² Dedicated Acres 320	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A
NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

¹⁶			¹⁷ OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief. Signature Printed Name Tina Huerta Title Regulatory Compliance Supervisor Date February 6, 2003
			⁸ SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief. Date of Survey Signature and Seal of Professional Surveyor: See Original Plat Certificate Number