Form 3 160-5 (August 1999)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED

	OMB No	1004-0135			
	Expires Jnovember 30, 20				
5	Lease Serial No				

6 If Indian, Allottee or Tribe Name

NM-57274

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or reenter an

abandoned well.	Use Form 3160-3 (APD)					
SUBMIT IN TRIPL	ICATE Other instruc	1	7. If Unit or CA/Agreement, Name and/or No			
1. Type of Well						
Oil Well Gas Well	Other	-	8. Well Name and No.			
2. Name of Operator		F	Haracz AMO Federal #2H			
Yates Petroleum Corporation	n	1	9 API Well No.			
3a Address	3b. Phone No (includ	de area code)	30-015-36355			
105 South Fourth Street, Artesia	(575) 748-1471	1	0 Field and Pool, or Exploratory Area			
4 Location of Well (Footage, Sec., 7	T, R., M., or Survey Description,	(Cotton Draw Brushy Canyon			
Surface: 500' FSL & 1650' F	=WL,	1	1 County or Parish, State			
BHL: 330' FNL & 1980' FWI	<u>L</u> ,	1,	Eddy Now Maying			
Section 24, T24S-R31E, Ur.	nit Letter (Surface N) (Bl		Eddy, New Mexico			
12. CHECK	APPROPRIATE BOX(ES)	JRE OF NOTICE	, REPORT, OR OTHER DATA			
TYPE OF SUBMISSION		TYPE OF ACTI	ON			
X Notice of Intent Acidize X Alter Casing		Deepen Fracture Treat	Reclamation			
Subsequent Report	Casing Repair Change Plans	New Construction Plug and Abandon	Recomplete Temporarily	Other		
Final Abandonment Notice	Convert to Injection	Plug Back	Water Dispos			
Yates Petroleum Corporation re Production string will be cerr Stage 1: Lead = 1025sx of F	espectfully requests permis nented in two stages wit PVL (YLD 1.82 WT 13) 1	ssion to change the l th a DV tool at app 12622'-7000' 35%	Production Cem prox. 7000' excess	osed work and approximate duration thereof. al depths of all pertinent markers and zones sequent reports shall be filed within 30 days interval, a Form 3160-4 shall be filed once have been completed, and the operator has ent as follows: zC (YLD 1.36 WT 14.2) 7000'-3900'		
Accepted for record						
	Thank-You, NMOCD 767/14/2017					
Thank-You,		14141000	19/124/m			
14 I hereby certify that the foregoing	is true and correct					
Name (Printed/Typed)		Title		MAZ-II DI		
Troy Po	Data	Well Planner				
Signature	Date	July 13, 2012				
THIS SPACE FOR FEDERAL OR STATE U				APPROVED		
Approved by		Title	N	Date /s/ Chris Walls		
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to conduct	table title to those nghts in the subj			JUL 1 3 2012		
Title 18 U.S.C. Section 1001, make falses firstitious or fraudulent states	e it a crime for any person kr ments or representations as to	y to make to any o s jurisdiction.	BUREAU OF LAND MANAGEMENT			
(Instructions on reverse)				CARLSDAUTIELU UTTIGL		

