

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010**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.***SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM114974
2. Name of Operator YATES PETROLEUM CORPORATION		6. If Indian, Allottee or Tribe Name
Contact: LAURA WATTS Email: laura@yatespetroleum.com		7. If Unit or CA/Agreement, Name and/or No. NMNM135355
3a. Address 105 SOUTH FOURTH STREET ARTESIA, NM 88210	3b. Phone No. (include area code) Ph: 575-748-4272 Fx: 575-748-4585	8. Well Name and No. BAROQUE BTQ FEDERAL COM 1H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 6 T19S R30E NWSE 1980FSL 2440FEL		9. API Well No. 30-015-43148
		10. Field and Pool, or Exploratory SANTO NINO; BONE SPRING
		11. County or Parish, and State EDDY COUNTY, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" 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 type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Hydraulic Fracture
	<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 recompleat 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 recompleat 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.)

1/24/16 - Applied 1500 psi on casing and logged well from 8,412 ft to the surface. TOC at 1,334 ft.

1/25/16 - Pressure tested casing to 3000 psi for 30 mins, held good. Opened toe sleeve at 15,374 ft. Pumped 1500 gals 15 percent NEFE HCL acid followed by 409 bbls 3 percent KCL with CRW-132 corrosion inhibitor.

2/14-22/16 - Perforated Bone Spring 8,774 ft - 15,324 ft (1,584 holes). Acidized Bone Spring with 132,000 gallons 15 percent HCL acid, frac toe sleeve and perforated Bone Spring with a total of 10,054,295 lbs of sand.

3/16/16 - Set AS-1 packer and 2-7/8 inch 6.40 lb L-80 tubing at 8,276 ft.

NM OIL CONSERVATION
ARTESIA DISTRICT

APR 04 2016

RECEIVED

14. I hereby certify that the foregoing is true and correct. Electronic Submission #334428 verified by the BLM Well Information System For YATES PETROLEUM CORPORATION, sent to the Carlsbad Committed to AFMSS for processing by DEBORAH HAM on 03/22/2016		ACCEPTED FOR RECORD MAR 25 2016 BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE
Name (Printed/Typed) LAURA WATTS	Title REG REPORTING TECHNICIAN	
Signature (Electronic Submission)	Date 03/22/2016	
THIS SPACE FOR FEDERAL OR STATE OFFICE USE		
Approved By _____	Title _____	Date _____
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.		
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.		

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

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