Form 3160-5 (April 2004)

## DEPARTMENT OF THE INTERIOR OCD-ARTESIA UNITED STATES BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No. 1004-0135

## **SUNDRY NOTICES AND REPORTS ON WELLS**

Expires March 31, 2007

SUNDRY NOTICES AND REPORTS ON WELLS  Do not use this form for proposals to drill or re enter an abandoned well. Use Form 3160-3 (APD) for such proposals.				5. Lease Serial No. NM-81952 6. If Indian, Allottee or Tribe Name 1987 444. 2560	
X Oil Well Gas	•		8. Well Name and No.		
Name of Operator			JAN 0 3 2006	Llama ALL F	ederal #4
Yates Petroleum Corporation		<u> </u>	OCU-ANTEON	19. API Well No.	
3a. Address		3b. Phone No. <i>(include area code)</i> 505-748-1471		30-015-34297	
105 S. 4th Str., Artesia, NM 4. Location of Well (Footage, Sec., T., R., M., C	303-7-10-1471		10. Field and Pool, or Exploratory Area  Cabin Lake Delaware		
			11. County or Parish, State		
330'FSL & 1650'FWL of Section 7-T22S-R31E (Unit N, SESW)				Eddy County, New Mexico	
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REI					THER DATA
TYPE OF SUBMISSION	TYPE OF SUBMISSION TYPE OF ACTION				
	Acidize	Deepen	Production	(Start/Resume)	Water Shut-Off
Notice of Intent	Alter Casing	Fracture Treat	Reclamation	ı	Well Integrity
X	Casing Repair	New Construction	on Recomplete		X Other 1st
Subsequent Report	Change Plans	Plug and Abande	on Temporarily	Abandon	Production
Final Abandonment Notice	Convert to Injection	Plug Back	Water Dispo	osal	
following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filled once testing has been completed. Final Abandonment Notices shall be filled only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)  12/19/05 Date of 1st production - Delaware  ACCEPTED FOR RECORD  DEC 2 9 2005  ALEXIS C. SWOBCDA  PETROLEUM ENGINEER					
14. I hereby certify that the foregoing is true a Name (Printed/Typed) Tina Huerta	nd correct		Regulatory Compli		<b>O</b> r
	THIS SPACE F	OR FEDERAL OR ST			
Approved by			Title	Date	)
Conditions of approval, if any, are attached. certify that the applicant holds legal or equite which would entitle the applicant to conduct op	Office				