Form 3160-5 (April 2004)

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

FORM APPROVED OMB No 1004-0135 Expires March 31, 2007

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NDRY	NOTICES	AND	REPORTS	ON	WELL	S
	110110110	,		• • •		_

5 Lease Serial No. VIV 83068

Domot use th	114141-02000					
abandoned well	6 If Indian, Allo	ttee or Tribe Name				
SUBMIT IN TRIPLI	ICATE - Other instr	uctions on reverse si	de -	7 If Unit or CA/	Agreement, Name and/or No	
Type of Well Oil Well X Gar	s Well Other	JUN 2 6 200)7	8 Well Name a	nd No	
Name of Operator Yates Petroleum Corporation	Zinnia Federal Unit #1					
a Address		3b Phone No (include area code)		30-015-27939		
105 S. 4th Str., Artesia, NM	88210	505-748-1471		10 Field and Pool, or Exploratory Area Burton Flat; Wolfcamp, East		
Location of Well (Footage, Sec., T, R, M.	, OR Survey Description)					
				11 County or P	arısh, State	
1980'FNL & 910'FWL of Section 27-T20S-R29E (Unit E, SWNW)					Eddy County, New Mexico	
12 CHECK APPROPI	RIATE BOX(ES) TO 1	NDICATE NATURE O	f notice, ri	EPORT, OR C	OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION					
	Acidize	Deepen	Production	(Start/Resume)	Water Shut-Off	
Notice of Intent	Alter Casing	Fracture Treat	Reclamation	n	Well Integrity	
Subsequent Report	Casing Repair	New Construction	Recomplete	:	X Other Name	
Subsequent Report	Change Plans	Plug and Abandon	Temporaril	y Abandon	Change	
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disp	osal		
Describe Proposed of Completed Operation (classified the proposal is to deepen directionally or recommendation)	•			• •		

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 recompletion 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

Former Wellname:

Zinnıa Federal Unit #1

New Wellname:

Zinnia BKC Federal #1

States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

SUBJECT TO LIKE APPROVAL BY STATE

14 I hereby certify that the foregoing is true and correct						
Name (Printed/Typed)						
Tina Huerta T		Regulatory Compliance Supervisor				
Signature (Sina) Luerta	Date	April 12, 2007	APPROVED			
THIS SPACE FOR FE	DERAL OR	STATE OFFICE USE				
Approved by		Title	DealUN 2 3 2007			
Conditions of approval, if any, are attached. Approval of this notice does not wai certily that the applicant holds legal or equitable title to those rights in the subjection would entitle the applicant to conduct operations thereon.		Office	MA LACALLO WESLEYN, INGRAM			
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willbully to make to any department of labelity of the Winted ER						