Form 3160-5 (SepterNoer 2001)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

Oil Cons. N.M. DIV-Dist. 2 1301 W. Grand Avenue Artesia, NM 88210

FORM APPROVED OMB No. 1004-0135

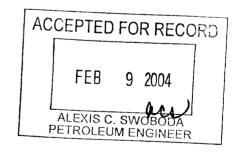
Expires January 31, 2004

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use the	NM-78214 6. If Indian, Allottee or Tribe Name				
SUBMIT IN TRIPLIC	7. If Unit or CA/Agreement, Name and/or No.				
Type of Well Oil Well X Gas	s Well Other	RE	CEIVED	8. Well Name and No	
2. Name of Operator Yates Petroleum Corporation				Anemone ANE 9. API Well No.	Federal #7
a. Address 105 S. 4th Str., Artesia, NM & Location of Well (Footage, Sec., T., R., M., O	b. Phone No. (include @@@)ARTESIA 505-748-1471		10. Field and Pool, or Exploratory Area Indian Basin Upper Penn Assoc.		
1310'FSL & 1003'FWL of Section 1980'FSL & 660'FWL of Section	11. County or Parish, State Eddy County, New Mexico				
12. CHECK APPROPR	IATE BOX(ES) TO II	NDICATE NATURE OF	NOTICE, REP	ORT, OR OTHE	ER DATA
TYPE OF SUBMISSION		TYPE	OF ACTION		
Notice of Intent X Subsequent Report Final Abandonment Notice	Acidize Alter Casing Casing Repair Change Plans Convert to Injection	Deepen Fracture Treat New Construction Plug and Abandon Plug Back	Production (S Reclamation Recomplete Temporarily	Abandon	Water Shut-Off Well Integrity Other 1st Prod.

If the proposal is to deepen directionally or recomplete 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 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 determined that the site is ready for final inspection.)

1/20/04 Date of 1st production



14. I hereby certify that the foregoing is true and correct	T			
Name (Printed/Typed)				
Tina Huerta		Regulatory Compliance Supervisor		
Signature Jine Huertas	Date	e February 3, 2004		
THIS SPACE F	OR FEDERAL OR	STATE OFFICE USE		
Approved by	Title	Date		
Conditions of approval, if any, are attached. Approval of this notice does certify that the applicant holds legal or equitable title to those rights in the which would entitle the applicant to conduct operations thereon.	Office	Office		
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a cr	ime for any person kn	owingly and willbully to make	ke to any department or agency of the United	
States any false, fictitious or fraudulent statements or representations as to	any matter within its is	risdiction		