Form 3160-5	_					C/S (*	
(Auguri 1983)920	272 UN	STATES	_		FORM APPROVED		
		JF THE INTERIOR	n Oil	Cons.	OMB No. 1004-0135 pires November 30, 20	200	
(m) 1000			N.M. E	)IV-Distes2	10.		
W JUA LOUL	Do not use this form for			arandway og u	Je		
RECEIVEL	andoned well. Use For	m 3160-3 (APD) for suc	ch proposals. Artesia,	NM® 88210	tee or Tribe Name		
Form 3160-5 (August 1999-20-27) UN' STATES DEPARTME, JF THE INTERIOR BUREAU OF LAND MANAGEMENT OIL CO JUN 2022 SUNDERY NOTICES AND REPORTS ON WELLS RECEIVED to not use this form for proposals to drill or to re-enter an 1301 W. Grau RECEIVED to not use this form for proposals to drill or to re-enter an 1301 W. Grau OCD - ARTESTA				N/A	N/A 7. If Unit or CA/Agreement, Name and/or No.		
SUBACTIN TRIPLICATE - Other Instructions on reverse side					N/A		
1. Type of Well E E Z L - LE					8. Well Name and No.		
Oil Well X Gas Well Other Injection					ACL FEDERAL	#1	
2. Name of Operator Yates Petroleum Corporation					37		
3a Address 3b. Phone No. (include area code)					ol, or Exploratory A	rea	
105 S. 4th Street - Artesia, NM 88210 505-748-1471							
4. Location of Well (Footage, Sec., T.,R., M., or Survey Description)					PECOS SLOPE ABO, WEST 11. County or Parish, State		
1980' FNL & 1980' FEL Section 1-T8S-R21E UNIT G SW/NE							
			NOTION DEPONT OF ATUE		OUNTY, NM		
TYPE OF SUBMISSION	ROPRIATE BOX(ES) TO	INDICATE NATURE OF	NOTICE, REPORT, OR OTHER TYPE OF ACTION				
X Notice of Intent	Acidize	Deepen	Production (Start/Resume)	Water Shut-Off	61		
Subsequent Report	Alter Casing	Fracture Treat	Reclamation	Weil Integrity	34567	<b>A</b> No.	
Final Abandonment Notice	Casing Repair		Recomplete		N	and the second	
	Change Plans	Plug and Abandon					
						D ARTESIA	
<u></u>	Convert to Injection	Plug Back	Water Disposal				
1. Notify NMOCD & BLM bbls of 2% KCL water. NI and RBP. Pump 2% KCL 2. RU wireline & RIH w/ 5 RD wireline. 3. RIH w/ tubing to 3315'	D wellhead, NU BOP; POH water as needed to keep v i-1/2" gauge ring to 3350' t	k. MIRU WSU & safety of I w/ tubing & seat nipple. well dead. to make sure casing is cl ne plugging mud w/ 25#	equipment. Bleed pressure off to . RIH w/ retrieving tool on tubing lear; RIH w/ 5-1/2" CIBP & set p t of gel/bbl of mud; close BOP &	& release RBP @ 34	05'. POH w/ tubir g w/ 35' cement.		
I hereby certify that the foregoing is true and correct Name ( <i>Printed/Typed</i> ) <b>Donna Clack</b>				Operations Technician			
Signature	1 (Jack		Date 5-21-02				
		THIS SPACE FOR FED	ERAL OR STATE OFFICE USE				
Approved by	7		Title DT		Date / /	· · · · · · · · · · · · · · · · · · ·	
Conditions of approval, if any, are	attached. Approval of this notice able title to those rights in the subj nereon.	does not warrant or certify that	ne Office PFC		6/6/0	<u>، ک</u>	
Title 18 U.S.C. Section 1001 and	Title 43 U.S.C. Section 1212 Crak	e it a crime for any person know	ringly and willfully to make to any departm	ient or agency of the United	States any faise, fictiti	ious	
or fraudulent statements or repre	sentations as to any matter within	its jurisdiction.					
	-ccered	SEE AT	TTACHED FOR				

CONDITIONS OF APPROVAL