N.M. DIV Dist. 2 Hobbi						
	UNITED STATES UNITED STATES DEPARTMENT OF THE INTERIOR Artesia, NW 88210 BUREAU OF LAND MANAGEMENT				FORM APPROVED OMB No. 1004-0135 Expires January 31, 2004	
SUNDRY NOTICES AND REPORTS ON WELLS				5. Lease Serial No.		
Do not use this form for proposals to drill or re enter an abandoned well. Use Form 3160-3 (APD) for such proposals.				NMNM53889 6. If Indian, Allottee or Tribe Name		
				o. Il Indian, Allottee		
SUBMIT IN TRIPLICATE - Other instructions on reverse side 1. Type of Well				7. If Unit or CA/Agreement, Name and/or No.		
Oil Well Gas Well X Other SWD				8. Well Name and No.		
2. Name of Operator				Champlin SW	<u>′D #1</u>	
Yates Petroleum Corporation 3a. Address 3b. Phone No. (include area code)				9. API Well No. 30-005-20878		
105 S. 4th Str., Artesia, NM				Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T., R., M.			SWD - San Andres			
E				11. County or Parish, State		
1980'FNL and 1980'FWL of Section 12-T8S-R31E				Chaves County, New Mexico		
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA						
TYPE OF SUBMISSION	TYPE OF ACTION					
X Notice of Intent	Acidize	Deepen Fracture Treat New Construction	Production (S Reclamation Recomplete	Start/Resume)	Water Shut-Off Well Integrity	
	Change Plans X	Plug and Abandon	Temporarily	Abandon	891011127378	
Final Abandonment Notice	Convert to Injection	Plug Back	Water Dispos	sal 5		
 Describe Proposed of Completed Operation (of the proposal is to deepen directionally or rec Attach the Bond under which the work will be following completion of the involved operation testing has been completed. Final Abandom determined that the site is ready for final insper Yates Petroleum Corporation [1. Notify the NMOCD and the fi- water. RIH with a 4-1/2" cement re- into the retainer at 3640' the can be pumped below the re- casing and the injection per- ppg mud with 25#/bbl of gel the stinger. Perforate with 4 holes at 210 casing to cover the salt sect on the tubing to 1682' and s with the tubing. Perforate w cement behind the casing to 4. ND the BOP and remove the 14. Thereby certify that the foregoing is true Name (<i>Printed/Typed</i>) 	complete horizontally, give subsurface location a performed or provide the Bond No. on file v s. If the operation results in a multiple comp ment Notices shall be filed only after all requi- iction.) plans to plug and abandon the BLM at least 24 hrs before s tainer and set at 3640'. RIH en pump 2% KCL water at a betainer, then squeeze 75 +/- forations in the San Andress in the mud then spot 25 sx 00' then RIH with a packer of tion, then POOH with the tuk queeze 50 sx cement behin with 4 holes at 100' then RIH to the surface then POOH with e wellhead and install a dry-	as and measured and true ver with BLM/BIA Required sub- letion or recompletion in a ne rements, including reclamation his well as follows tarting the work. I with a cement sti 2-3 BPM rate thro sx cement below then pull out of the cement on top of the cement on top of the cement on top of the cement on top of the complete the the state of the d the casing to co with a packer on the the tubing. Spot hole marker and con-	tical depths of all pe sequent reports shal aw interval, a Form 3 in, have been comple : Load the hol nger on a stri- bugh the retainer the retainer and the retainer and the retainer to 50' and sque th 4 holes at ver the base the tubing to at 5 sx cemes clean up the	rtinent markers and zon I be filed within 30 day 160-4 shall be filed on eted, and the operator h c	Able with 10.0 the twin a packer . TAG casing then POOH bis of solutions and the hole with 50 sx g at surface.	
Tina Huerta			tory Complia	ince Superviso		
signature Jina Huerta		Date June 4,	2003			
THIS SPACE FOR FEDERAL OR STATE OFFICE USE						
Approved by		Title	PE	Date	6/10/03	
Conditions of approval, if any, are attached certify that the applicant holds legal or eq which would entitle the applicant to conduct	rant or ct lease Office	RFO N	SEE ATT	ACHED FOR		
Title 18 U.S.C. Section 1001 and Title 43 U			willbully to make	to any department	A CHECKAMPPHOVAL	
States any false, fictitious or fraudulent stat	ements or representations as to any ma					