Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

(Instructions on page 2)



FORM APPROVED OMB No 1004-0137 Expires. July 31, 2010

Do not use this fo	OTICES AND REPORTS O Form for proposals to drill Se Form 3160-3 (APD) for	or re enter in	BS 0(5. Lease Serial No.	NM-90 ee or Tribe Name N/A	
SUBMIT IN TRIPLICATE - Other instructions on page 2.				7. If Unit or CA/Agreement, Name and/or No.		
1. Type of Well				N/A		
X Oil Well Gas Well Other				8. Well Name and No		
2 Name of Operator Vetos Potroloum Corporation				Amazing BAZ Federal 3		
Yates Petroleum Corporation 3a Address	hone No (include area code)	No (include area code)		30-025-38450		
105 S. 4th St., Artesia, NM 88210		(575) 748-147			or Exploratory Area	
4 Location of Well (Footage, Sec., T., R., M., OR Survey Description)					Livingston Ridge; Delaware, SE	
	RE (SESE) Unit P		11. County or Parish, State Lea, NM			
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA						
TYPE OF SUBMISSION	TYPE OF ACTION					
Notice of Intent	Acidize Alter Casing	Deepen Fracture Treat	Production (Start/Resume)	Water Shut-Off Well Integrity	
X Subsequent Report	Casing Repair	New Construction	Recomplete		Other	
	Change Plans	Plug and Abandon	Temporarily	Abandon	Production	
Final Abandonment Notice	Convert to Injection	Plug Back	Water Dispo	sal	Casing	
D167 (yld 1.42, wt 13) 0.225#/sx D167 + 75#	ions If the operation results in a mul ment Notices shall be filed only after election # J-55 csg @ 8600'. Flo 0.792#/sx D044 + 0.15# . Tailed in w/460 sx PVI /sx D049 (yld 1.40, wt 13	ltiple completion or recomplet r all requirements, including re- part collar @ 8557'. t/sx D046 + 75#/sx I L + 0.075#/sx D013	ion in a new interval, a clamation, have been c Cemented w/4 D049 + 0.15#/s	Form 3160-4 shall ompleted, and the completed and the completed and the complete sx PVL + 5x D065 + 0.	the filed once operator has been supported by th	
14 I hereby certify that the foregoing is true and correct Name (Printed/Typed)				BUREA	U OF LAND MANAGEMENT	
Allison Barton		Title Regu	latory Complia	hce/Teckinik	SISBAD FIELD OFFICE	
Signature Alboir Boxfor		Date 8/20/	Date 8/20/08			
THIS SPACE FOR FEDERAL OR STATE OFFICE USE						
Approved by		. Title .		Da	ate	
Conditions of approval, if any, are attached. A that the applicant holds legal or equitable title entitle the applicant to conduct operations thereo	ant or certify hick would Office					
Title 18 U.S.C Section 1001 and Title 43 U S.C	C. Section 1212, make it a crime for an	ny person knowingly and willfu	illy to make to any dep	artment or agency of	of the United States any false,	