New Mexico Oil Conservation Division, District I

| Form 3160-5 (August 1999) | ∫NITE DEPARTMENT | | obbs, NF4 88229 | FORM APPROVED OMB No. 1004-0135 | |
|---|---|--|---|--|--|
| (August 1999) | BUREAU OF LAND MANAGEMENT | | | Expires November 30,2000 | |
| ; | SUNDRY NOTICES A | WELLS | 5. Lease Serial No. | | |
| | NM-2593 | | | | |
| ar | abandoned well. Use Forr | n 3160-3 (APD) for such | proposals. | 6. If Indian, Allottee or Tribe Name | |
| SUBMIT | 7. If Unit or CA/Agreement, Name and/or No. | | | | |
| Type of Well All Oil well Gas Well Gas Well | Other | | | 8. Well Name and No. | |
| | Jourer | | | | |
| 2. Name of Operator Vates Petrol | eum Corporation | | | Ed Powell Federal IG 1 | |
| Yates Petroleum Corporation 3a. Address 3b. Phone No.(include area code) | | | | 30-025-25583 | |
| 105 South F | ourth Street | 50 | 5-748-1471 | 10. Field and Pool, or Exploratory Area | |
| 4. Location of Well (Footage, Sec., T., R., M., OR Survey Description) | | | | Leonard Queen | |
| l lmik | 11. County or Parish, State | | | | |
| Unit | Lea | | | | |
| 12. CHECK APPROPR | IATE BOX(ES) TO IN | DICATE NATURE C | F NOTICE, REPORT, O | R OTHER DATA | |
| TYPE OF SI | JBMISSION | | TYPE OF ACTION | | |
| X Notice of Intent | Acidize | Deepen | Production (Start/Resume | e) Water Shut-Off | |
| | Alter Casing | Fracture Treat | Reclamation | Well Integrity | |
| Subsequent Report | Casing Repair | New Construction | Recomplete | X Other Drill out CIBP and cement | |
| | Change Plans | Plug and Abandon | Temporarily Abandon | | |
| Final Abandonment Notice | Convert to Injection | Plug Back | Water Disposal | | |
| If the proposal is to deepen di Attach the Bond under which the following completion of the inv | rectionally ro recomplete horizon ne work will be performed or prolived operations. If the operation Final Abandonment Notices sh | tally, give subsurface location ovide the Bond no. on file w n results in a muliple completion | s and measured and true vertical dep with BLM/BIA. Required subsequent on or recompletion in a new interval | work and approximate duration thereof. oths of all perinent markers and zones. t reports shall be filed within 30 days. , a Form 3160-4 shall be filed once have completed and the operator has | |
| Propose to drill out c | ement and CIBP @ | 3525'; re-perforate | e Queen 3596-3602', 3 | 8608-3612', 3620-3625', | |
| 3632-3637'; and acj | lize. | | | | |
| <u>, * * * * * * * * * * * * * * * * * * *</u> | and a summary to the | 7 | | | |
| | 2 2 2002 | ДР | PROVED FOR | MONTH PERIOD | |
| 4 | 58 | IN. | DING | -22-2003 | |
| 14 I hereby certify that the for | egoing is true and correct | io | | | |
| Name (Printed/Type | ed) | <u>: </u> | B. lateral | Danielian da Tarkeinian | |
| Stormi Davis | | | Title Regulatory (| Compliance Technician | |
| Signature Storme James | | | Date | 19-Nov-02 | |
| | THIS SPACE F | OR FEDERALIONST | TEOFFICE USE | 22 (TABLE - 1878) (Ta | |
| Approved by | | | Title | Date | |
| Conditions of approval, if any, are certify that the applicant holds leg | attached. Approval of this noticial or equitable title to those right | e does not warrant or s in the subject lease | Office | | |

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 or agency of the United



Which would entitle the applicant to conduct operations thereon.

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

New Mexico Oli Corservadia UN DISTATES RTM. OF THE INTERNOR PERSON **DEPARTM** BUREAU OF LAND MANAGEMENT, TOTAL

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an

FORM APPROVED

NM-2593

| | OMB No. 1004-0135 | |
|-----------------|---------------------------|--|
| | Expires November 30, 2000 | |
| 5. Lease Serial | No. | |

| | andoned well. Use Forn | 6. If Indian, Allottee or Tribe Name | | | | | | |
|--|------------------------------------|---------------------------------------|---|--|--|--|--|--|
| an | andoned well. Use Form | N/A | | | | | | |
| | | | | 7. If Unit or CA/Agreement, Name and/or No. | | | | |
| | BMIT IN TRIPLICATE - O | | | | | | | |
| ्रं <u>SU</u> Type of Well | BMIT IN TRIPLICATE - O | ther mandonone on to | | 8. Well Name and No. | | | | |
| φil Weli | Gas Weli | Other | Injection | ED POWELL FEDERAL IG #1 | | | | |
| Name of Operator | | | | 9. API Well No. | | | | |
| Yates Petroleum Co | rporation | | | 30-025-25583 | | | | |
| Address | | 3b. Phone No. (included) 505-748-1471 | de area code) | 10. Field and Pool, or Exploratory Area | | | | |
| 105 S. 4th Street - A | rtesia, NM 88210 | LEONARD QUEEN | | | | | | |
| Location of Well (Footage, Sec | c., T.,R., M., or Survey Descrip | 11, County or Parish, State | | | | | | |
| | Section 18-T20 | 66 D20E | | | | | | |
| 650' FSL & 330' FWL | | | | LEA COUNTY, NM | | | | |
| 12 CHECK APP | POPRIATE BOX(ES) TO | INDICATE NATURE OF | NOTICE, REPORT, OR OTHER | DATA | | | | |
| YPE OF SUBMISSION | KOI KIATE BOX(EE) | | TYPE OF ACTION | | | | | |
| Notice of Intent | Acidize | Deepen | Production (Start/Resume) | Water Shut-Off | | | | |
| Subsequent Report | Alter Casing | Fracture Treat | Reclamation | Well integrity | | | | |
| Final Abandonment Notice | Casing Repair | New Construction | Recomplete | Other | | | | |
| | Change Plans | Plug and Abandon | X Temporarily Abandon | | | | | |
| | Convert to Injection | Plug Back | Water Disposal | | | | | |
| | Onestica (aleady state all pertine | ot details, including estimated st | arting date of any proposed work and appro- | ximate duration thereof. If the proposal is to deepen ach the Bond under which the work will be performed erations. If the operations results in a multiple | | | | |
| directionally or recomplete horizontally, give subsurface locations and measured and title vertical depth of a 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 operations 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 inspectition.) 9-17-02- Unseated pump, TOH, lay down rods. NU BOP, TOH w/ tubing; RU wireline. TIH w/ gauge ring & junk basket to 3596'. Set 5-1/2" CIBP @ 3525'. Cap w/ 35' cement. Witnessed by BLM in Hobbs. TIH w/ open ended tubing to 33,400'. SD. 9-18-02- Circulated well w/ 2% KCL w/ inhibitor. Tested 30 minutes @ 500#; chart witnessed by BLM - Hobbs. TOH, laid down aall tubing. Loaded hole, capped well, rigged down. Well is T/A - FINAL REPORT. Chart is attached. | | | | | | | | |
| noie, capped well, rigged | down. Well is 1774 - 1 11 V.C. | THE OTT STATE | | | | | | |
| | | | | DOZPIED FOR RECORD | | | | |
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| | | | | 001 - 3 2002 | | | | |
| | | Į (| ORIG. SGD.) GARY GO | URLEY | | | | |
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| | | | | FIT HELM EMBRIER | | | | |
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| | | | | | | | | |
| | | | | | | | | |
| | - is two and correct | | | | | | | |
| hereby certify that the foregoing Name (<i>Printed/Typed</i>) | g is true and conect | | Title | | | | | |
| Donna Clack | _ | | Regulatory Technicia | ın. | | | | |
| Signature | \sim Ω_{II} | | Date | ; | | | | |
| | Onna Cla | ck | 9-30-02 | | | | | |
| THIS SPACE FOR FEDERAL OR STATE OFFICE USE | | | | | | | | |
| | | | Title | Date | | | | |

Office

Title 18USC Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious

applicant to conduct operations thereon.

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant noids legal or equitable title to those rights in the subject lease which would entitle the

or fraudient statements or representations as to any matter within its jurisdiction.

Approved by