

|  |                            |                   | INMOCD ARTESIA                              |
|--|----------------------------|-------------------|---|
| Submit One Copy To Appropriate District Office   | State of New               |                   | Form Caliba                                 |
| District 1   | Energy, Minerals and       | Natural Resources | March 18, 2009 WELL API NO.                 |
| 1625 N. French Dr., Hobbs, NM 88240<br>District II   | OIL CONGEDIAL              | TON TON HOLON     | 30-015-24397                                |
| 1301 W. Grand Ave., Artesia, NM 88210  | OIL CONSERVAT              |                   | 5. Indicate Type of Lease                   |
| <u>District III</u><br>1000 Rio Brazos Rd., Aztec, NM 87410  | 1220 South St. Francis Dr. |                   | STATE FEE X                                 |
| <u>District IV</u><br>1220 S. St. Francis Dr., Santa Fe, NM  | Santa Fe, NI               | M 8/303           | 6. State Oil & Gas Lease No.                |
| 87505  |                            |                   |   |
|  | AND REPORTS ON WI          |                   | 7. Lease Name or Unit Agreement Name        |
| (DO NOT USE THIS FORM FOR PROPOSALS DIFFERENT RESERVOIR. USE "APPLICATION"   |                            |                   | Ingram Jackson BV                           |
| PROPOSALS.)  |                            | •                 | 8. Well Number                              |
|  | Well X Other PA            |                   |   |
| 2. Name of Operator Yates Petroleum Corporation  |                            |                   | 9. OGRID Number 025575                      |
| 3. Address of Operator   |                            |                   | 10. Pool name or Wildcat                    |
| 105 S. 4 <sup>th</sup> Street, Artesia, NM 88210   |                            |                   | Eagle Creek; San Andres                     |
| 4. Well Location   |                            |                   |   |
| Unit Letter A : 990 feet from the North line and 990 feet from the East_line   |                            |                   |   |
| Section 27 Township 17S Range 25E NMPM Eddy County   |                            |                   |   |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)   |                            |                   |   |
|  |                            |                   |   |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   |                            |                   |   |
| NOTICE OF INTER  | ATION TO:                  | SUB               | SEQUENT REPORT OF:                          |
|  | UG AND ABANDON             | REMEDIAL WOR      |   |
| TEMPORARILY ABANDON 📋 CH   | ANGE PLANS                 | COMMENCE DRI      | LLING OPNS. P AND A                         |
| PULL OR ALTER CASING 🔲 MU  | JLTIPLE COMPL              | CASING/CEMENT     | 「JOB □                                      |
| OTHER:   |                            | M Langtion in re  | and of the OCD impropriate of the DSA       |
| OTHER:   |                            |                   |   |
| Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.  |                            |                   |   |
| A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the   |                            |                   |   |
| OPER LOOP VALVE A FACE VALVE WERE A MARCHER AND A RANGE FOR CALL POPER A GRANT POPER A |                            |                   |   |
| OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR  |                            |                   |   |
| PERMANENTLY STAMPED ON THE MARKER'S SURFACE.   |                            |                   |   |
|  |                            |                   |   |
| The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and   |                            |                   |   |
| other production equipment.  Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.   |                            |                   |   |
| If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with   |                            |                   |   |
|  |                            |                   | uction equipment and junk have been removed |
| from lease and well location.  |                            |                   |   |
| All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have to be removed.)   |                            |                   |   |
| All other environmental concerns have been addressed as per OCD rules.   |                            |                   |   |
| Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-   |                            |                   |   |
| retrieved flow lines and pipelines.  |                            |                   |   |
|  |                            |                   |   |
| When all work has been completed, return this form to the appropriate District office to schedule an inspection.   |                            |                   |   |
| 1  | <i>[</i> ]                 |                   |   |
| SIGNATURE SIGNATURE  | lo TITL                    | E environmental   | scientist DATE 7/23113'                     |
|  | 1.1                        | atrujillo@yata    | spetroleum.com                              |
| TYPE OR PRINT NAME Amanda  | Trujilo E-MA               | AIL: marin        | PHONE: <u>575-748-147</u>                   |
| For State Use Only   | 01                         | ,                 | . /. /                                      |
| APPROVED BY:   | MM TITI                    | E C.O.            | DATE 6/6/13                                 |
| Conditions of Approval (if any):   | - 1010111                  |                   |   |

OK TO RETENSE.