

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico

Form C-101
Revised December 16, 2011

Energy Minerals and Natural Resources

Oil Conservation Division

1220 South St. Francis Dr.

Santa Fe, NM 87505

Permit

RECEIVED
AUG 16 2013
NMOCD ARTESIA

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

¹ Operator Name and Address Yates Petroleum Corporation 105 South Fourth Street Artesia, NM 88210	² OGRID Number 025575
⁴ Property Code 14393	³ API Number 30-015-28370
⁵ Property Name Boyd X State(NDDUP Unit #135)	⁶ Well No. 06

⁷ Surface Location

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County
O	29	19S	25E		660	South	1980	East	Eddy

⁸ Pool Information

Seven Rivers, Bone Spring WC; Seven Rivers; B.S. (OIL)	99711
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Additional Well Information

⁹ Work Type P	¹⁰ Well Type O	¹¹ Cable/Rotary N/A	¹² Lease Type State	¹³ Ground Level Elevation 3512'GL
¹⁴ Multiple N	¹⁵ Proposed Depth N/A	¹⁶ Formation Bone Spring	¹⁷ Contractor N/A	¹⁸ Spud Date N/A
Depth to Ground water		Distance from nearest fresh water well		Distance to nearest surface water

¹⁹ Proposed Casing and Cement Program

Type	Hole Size	Casing Size	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
REFER TO ORIGINAL COMPLETION						

Casing/Cement Program: Additional Comments

Yates Petroleum Corporation plans to plug back and recomple this well as follows: NU BOP. Make a GR & JB run down to 7,610'; set 7" CIBP at 7,600' cap with 25 sx class H cement. Run a CCL/CBL/GR log from PBDT to at least 2,000' w/ 1500 psi on the casing. Report top of cement. Perforate at Bone Spring 5874' - 6,024' (69). Acidize w/ 6,000 gals of 20% HCL with 2 gal/M gelling agent, cationic surfactant, corrosion inhibitor and iron control and additives. Drop 65 1.3 SG RCN ball sealers spaced out evenly throughout the acid. Flush to the bottom perf and over flush by 75 bbls. Swab test and evaluate. Note: If there appears to be communication w/ upper perms, set RBP at 5,900' and packer at 5,850'. Acidize w/ 5,000 gals of 20% HCL. Drop 50 1.3 SG RCN ball sealers spaced out evenly throughout the acid. Flush to the bottom perf and over flush by 75 bbls. Swab test and evaluate. Release packer and RBP. TIH with prod equipment. Turn well to production. Wellbore schematics attached. Well name will change when recompleted.

Proposed Blowout Prevention Program

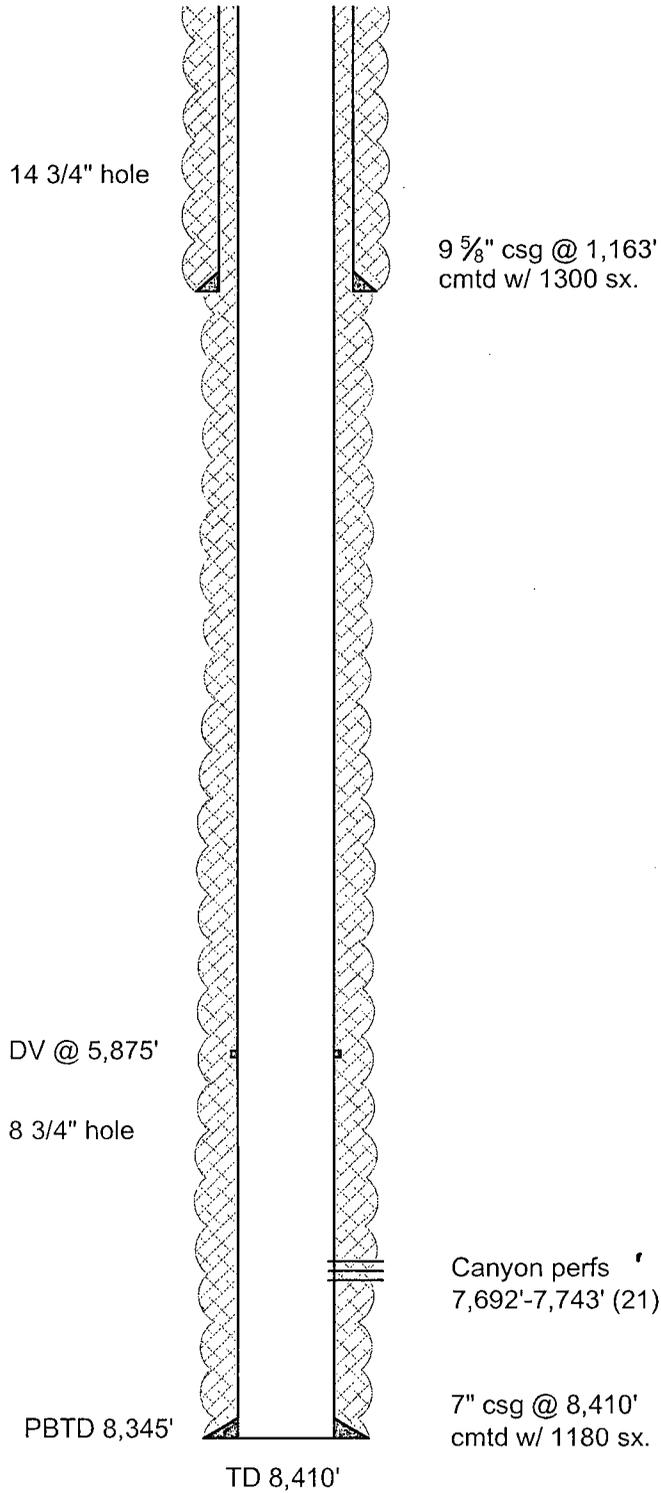
Type	Working Pressure	Test Pressure	Manufacturer
Manual BOP	3000 psi	3000 psi	Whichever company is available

I hereby certify that the information given above is true and complete to the best of my knowledge and belief. I further certify that the drilling pit will be constructed according to NMOCD guidelines <input type="checkbox"/> , a general permit <input type="checkbox"/> , or an (attached) alternative OCD-approved plan <input type="checkbox"/> . YPC uses steel tanks only. Signature: Laura Watts Printed name: Laura Watts Title: Regulatory Reporting Technician E-mail Address: laura@yatespetroleum.com Date: August 15, 2013 Phone: 575-748-4272	OIL CONSERVATION DIVISION Approved By: J. C. Shepard Title: Biologist Approved Date: 8/19/2013 Expiration Date: 8/19/2015 Conditions of Approval Attached
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Well Name: NDDUP Unit #135 Field: Dagger Draw
 Location: 660' FSL & 1980' FEL Sec 29-19S-25E
 County: Eddy State: New Mexico
 GL: 3,512' Zero: KB:
 Spud Date: 4/1/1995 Completion Date: 4/29/1995
 Comments: API # 30-015-28370

Casing Program	
Size/Wt/Grade	Depth Set
9 5/8" 36# J-55	1,163'
7" 26# & 23# J-55	8,410'

BEFORE



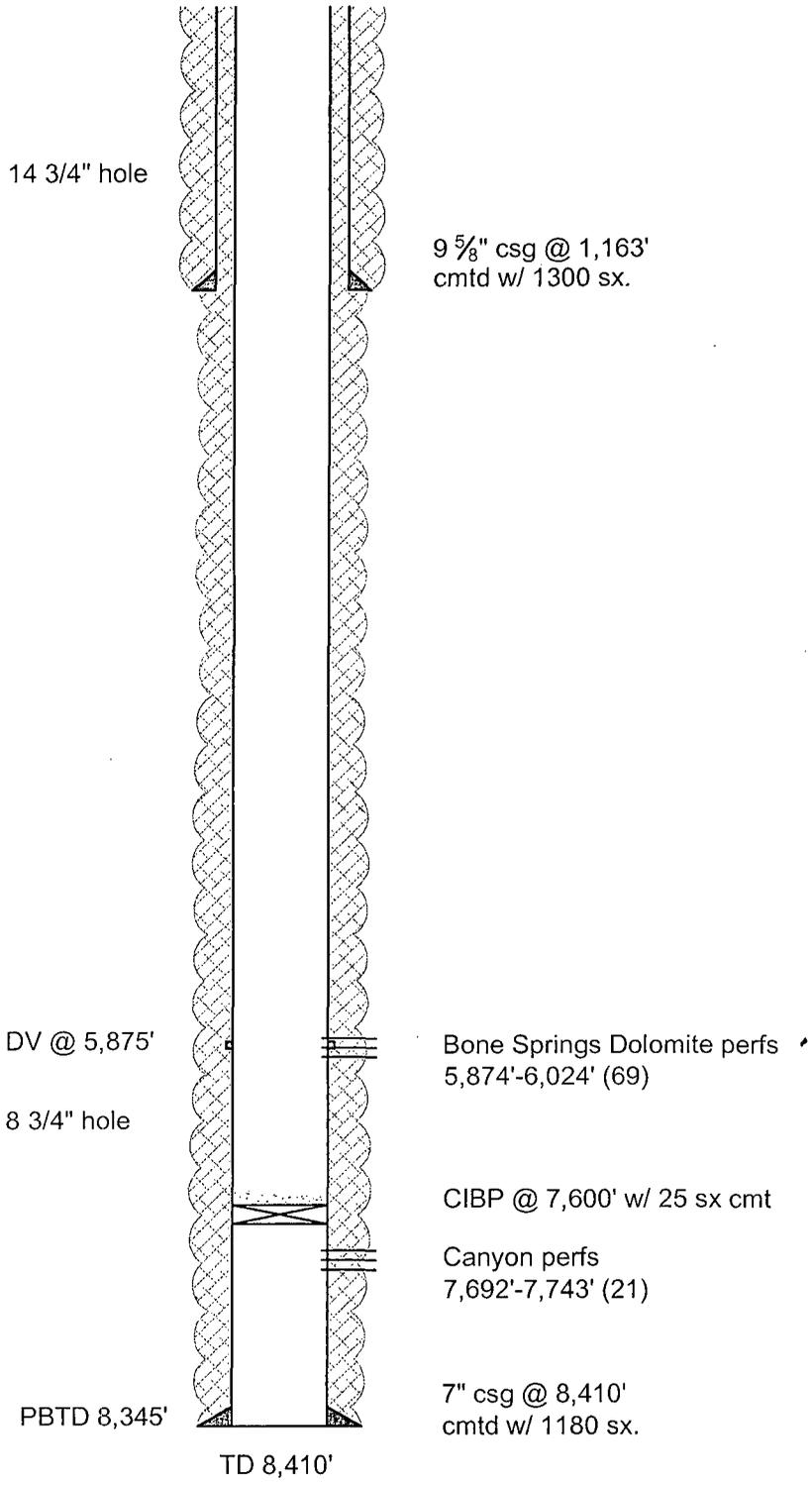
SKETCH NOT TO SCALE

DATE: 6/7/2013

Well Name: NDDUP Unit #135 Field: Dagger Draw
 Location: 660' FSL & 1980' FEL Sec 29-19S-25E
 County: Eddy State: New Mexico
 GL: 3,512' Zero: KB:
 Spud Date: 4/1/1995 Completion Date: 4/29/1995
 Comments: API # 30-015-28370

Casing Program	
Size/Wt/Grade	Depth Set
9 5/8" 36# J-55	1,163'
7" 26# & 23# J-55	8,410'

AFTER



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State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-015-28370	² Pool Code 97711	³ Pool Name WC; Seven Rivers; Bone Spring (014)
⁴ Property Code	⁵ Property Name Boyd X State(NDDUP Unit #135)	
⁷ OGRID No. 025575	⁸ Operator Name Yates Petroleum Corporation	⁶ Well Number 6
⁹ Elevation 3512'GL		

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
O	29	19S	25E		660	South	1980	East	Eddy

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

¹² Dedicated Acres 40	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

16				¹⁷ OPERATOR CERTIFICATION <i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</i>		
				Signature: <u>Laura Watts</u> Date: <u>August 15, 2013</u> Printed Name: <u>Laura Watts</u> E-mail Address: <u>laura@yatespetroleum.com</u>		
				¹⁸ SURVEYOR CERTIFICATION <i>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</i>		
				Date of Survey: _____ Signature and Seal of Professional Surveyor: _____ Certificate Number: _____		

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