Submit 1 Copy To Appropriate District Office District I – (575) 393-6161 HORSS OCD Energy, Minerals and Natural Resource 1625 N. French Dr., Hobbs, NM 88240 District III – (575) 748-1283 811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 District III – (505) 334-6178 District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NMECEIVED 87505	N 30-025-40517 5. Indicate Type of Lease STATE FEE 6. State Oil & Gas Lease No. VO-8090
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: Oil Well (Gas Well Other) 2. Name of Operator Yates Petroleum Corporation 3. Address of Operator 105 South Fourth Street, Artesia, NM 88210	7. Lease Name or Unit Agreement Name Mango BRM State 8. Well Number 1H 9. OGRID Number 025575 10. Pool name or Wildcat Featherstone; Bone Spring
4. Well Location Unit Letter C: 100 feet from the North line and Unit Letter N 330 feet from the South line and Section 27 Township 20S Range 3 11. Elevation (Show whether DR, RKB, RT, C) 3682'GR	5E NMPM Lea County
	SUBSEQUENT REPORT OF:
OTHER: 5 13. Describe proposed or completed operations. (Clearly state all pertinent det date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For 1 proposed completion or recompletion. 6/26/13 – Made 5' new hole at 9:55 AM. TD 85'. Hole size 12-1/4". Notified E.L.	Multiple Completions: Attach wellbore diagram of
Spud Data: 8/31/12 Pig Palage Data:	
Spud Date: Rig Release Date: I hereby certify that the information above is true and complete to the best of my known in the information above is true and complete to the best of my known in the information above is true and complete to the best of my known in the information above is true and complete to the best of my known in the information above is true and complete to the best of my known in the information above is true and complete to the best of my known in the information above is true and complete to the best of my known in the information above is true and complete to the best of my known in the information above is true and complete to the best of my known in the information above is true and complete to the best of my known in the information above is true and complete to the best of my known in the information above is true and complete to the best of my known in the information above is true and complete to the best of my known in the information above is true and complete to the best of my known in the information above is true and complete to the best of my known in the information above is true and complete to the best of my known in the information above is true and complete to the best of my known in the information above is true and complete to the best of my known in the information above is true and complete to the best of my known in the information above is true and complete to the best of my known in the information above is the information above in the information above is the information above in the information abo	owledge and belief.
TITLE Regulatory Reportin Type or print name Tina Huerta E-mail address: tinah@yatespetrol For State Use Only	<u>g Supervisor</u> DATE <u>July 7, 2013</u> <u>leum.com</u> PHONE: <u>575-748-4168</u>
APPROVED BY: Conditions of Approval (if any) CG 7-9-20/3	JUL 1 0 2013