Submit 1 Copy To Appropriate District Office	State of New Mexico			Form C-103				
District I – (575) 393-6161	Energy, Minerals and Natural Resources			Revised July 18, 2013				
1625 N. French Dr., Hobbs, NM 88240				WELL API NO.				
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION				25-42732			
District III – (505) 334-6178	1220 South St. Francis Dr.				cate Type of Lea		/	
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505				STATE 🛛	FEE		
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505					6. State Oil & Gas Lease No. V-8801			
SUNDRY NOT (DO NOT USE THIS FORM FOR PROPO		PEN OR PLU	UG BACK TO A		se Name or Unit ly Rest BWG Sta		Vame	
DIFFERENT RESERVOIR. USE "APPL PROPOSALS.)	PLICATION FOR PERMIT" (FORM C-101) FOR SUCH				8. Well Number			
1. Type of Well: Oil Well	Gas Well Other	HOE	BBS OCD	1H			/	
2. Name of Operator Yates Petroleum Corporation		A.A.A.	R 2 8 2016	9. OG	RID Number		1	
3. Address of Operator	WAR 2 0 2010				10. Pool name or Wildcat			
105 South Fourth Street, Artesia, NM 88210				Arka	Arkansas Junction; Bone Spring			
4. Well Location		RE	CEIVED					
Unit Letter P : Help :	feet from the feet from the	South		660	feet from the	East East	line line	
Section 3		- POX	nge <u>36E</u>	NMPM		County		
Section 34			nge 36E	NMPM		County		
	11. Elevation (Show wh	nether DR,	RKB, RT, GR, et	c.)				
		3,777	GR					
TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER:		otata all'a	COMMENCE DI CASING/CEME	NT JOB 5' new ho	ble			
 Describe proposed or com of starting any proposed w proposed completion or re 	ork). SEE RULE 19.15.7.							
3/23/16 – Made 5' new hole. TD 6	0' Hole size 20"							
3/23/10 - Wade 3 new note. 1D 0	o . Hole size 20 .							
	1101 (200) 1			/1.7				
Note: Reamed hole to 36" set and of	cemented 10° of 30° culver	t with loc	king ring on 9/18/	15.				
Sand Date: 8/31/15								
Spud Date: 8/31/13	Rig R	Release Da	ite:					
I have been a satisfied that the information	shows is two and somelat	o to the h	at af my len avyla	las and hal	:-£			
I hereby certify that the information	above is true and complet	te to the be	est of my knowled	ige and bei	iei.			
SIGNATURE LAME	La ta	E Page	ulatory Reporting	Technician	DATE Ma	rch 24, 2016		
Type or print name Laura W	/atts E-mail add	dress: la	ura@yatespetrole	eum.com	PHONE:	575-748-427	12_	
For State Use Only	e man and y							
APPROVED BY:	IC Record TITL	E			DATE			
Conditions of Approval Till and	Record Only		The state of the s					