Submit 1 Copy To Appropriate District	State of New Mexico		Form C-103	
District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 BS OCD District II – (575) 748-1283 HOBBS OCD OUL CONSERVATION DIVISION			WELL API NO. 30-025-42744	, 2013
811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION District III - (505) 334-6178 1220 South St. Francis Dr. 1000 Bio Brazos Rd. Actes, NM 884400 9 2016		5. Indicate Type of Lease		
		STATE FEE		
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Oil & Gas Lease No. VB-1915	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			7. Lease Name or Unit Agreement Name Prizehog BWZ State Com	
			8. Well Number	
 Type of Well: Oil Well Gas W Name of Operator 	Tell Other		1H 9. OGRID Number	_
Yates Petroleum Corporation			025575	
 Address of Operator South Fourth Street, Artesia, NM 88210 			10. Pool name or Wildcat Wildcat; Lower Bone Spring	
4. Well Location Unit Letter C : 330	feet from the North	h line and	1650 feet from the West	line
Unit Letter \underline{N} $\underline{330}$	feet from the South			line
Section 19		nge 36E	NMPM Lea County	
11. F	Elevation (Show whether DR 2,958		.)	
12. Check Approx	priate Box to Indicate N	lature of Notice.	Report or Other Data	
NOTICE OF INTEN			SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR				
	NGE PLANS	COMMENCE DR	ILLING OPNS. P AND A	
	TIPLE COMPL	CASING/CEMEN	ІТ ЈОВ	
DOWNHOLE COMMINGLE				
OTHER:		OTHER:	5' new hole	\boxtimes
			nd give pertinent dates, including estimate mpletions: Attach wellbore diagram of	d date
proposed completion or recomplet			1	
6/3/16 – Made 5' new hole. TD 80'. Hole	size 20"			
0/5/10 - Made 5 new note. 1D 80 . 1101e	5120 20 .			
Note: 30" culvert with locking lid installed	on 10/26/15.			
Spud Date: 9/1/15	Rig Release Da	ate:		
I hereby certify that the information above	s true and complete to the b	est of my knowledg	ge and belief.	
10 000 1 1				
SIGNATURE TOUCH NO	TITLE Reg	ulatory Reporting 7	Cechnician DATE June 6, 2016	
Type or print name <u>Laura Watts</u>	E-mail address: la	aura@yatespetroleu	m.com PHONE: <u>575-748-4272</u>	
For State Use Only	Accepted for Record	Only		
APPROVED BY: Conditions of Approval (if any):	TITLE		DATE	
conditions of Approval (it any):	MAB/0CD 6/9/201			
	6/9/201	6		r
		Sec. 4		

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