Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103	
District I – (575) 393-6161 Energy, Minerals and Natural Resources			WELL API NO.	
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283			30-025-42733	
811 S. First St., Artesia, NM 88210	811 S. First St., Artesia, NM 88216 BBS OF DONSERVATION DIVISION		5. Indicate Type of Lease	
District III – (505) 334-6178 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410		eis Dr.	STATE FEE	
District IV – (505) 476-3460 AUG 0 3 2016 Santa Fe, NM 87505 Santa Fe, NM 87505		0.	6. State Oil & Gas Lease No. VB-1917	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name or Unit Agreement Name Wildhog BWX State Com	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			Well Number	
Type of Well: Oil Well Gas Well Other Name of Operator			OGRID Number	
Yates Petroleum Corporation			025575	
3. Address of Operator			10. Pool name or Wildcat	
105 South Fourth Street, Artesia, NM 88210			Wildcat; Lower Bone Spring	
4. Well Location				
Unit Letter C : 20		line and 1980	feet from the	West line
Unit Letter N 33	0 feet from the South	line and 1980	feet from the	West line
Section 20 Township 26S Range 36E NMPM Lea County				
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2,943' GR				
12. Chaola Am	proprieto Poy to Indicate No	turn of Notice Per	aget on Other Date	
12. Check Ap	propriate Box to Indicate Nat	ture of Notice, Rep	ort of Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK			ALTERIN	IG CASING
TEMPORARILY ABANDON				
A STATE OF THE STA	MULTIPLE COMPL	CASING/CEMENT JO	В	
DOWNHOLE COMMINGLE				
CLOSED-LOOP SYSTEM OTHER:		OTHER: 5' new	hole	\bowtie
13. Describe proposed or complete				Bornell
). SEE RULE 19.15.7.14 NMAC.			
proposed completion of recon-	pretton.			
7/29/16 – Made 5' new hole. TD 95'. Hole size 20".				
Note: 30" culvert with locking lid insta	alled on 10/26/15.			
Spud Date: 9/1/15	Rig Release Date	e:		
<u> </u>				
I hereby certify that the information about	ove is true and complete to the best	t of my knowledge and	d belief.	
1	\			
SIGNATURE TITLE Advanced Regulatory Reporting Analyst DATE August 1, 2016				
Type or print name Laura Watts	E-mail address: laur	ra@yatespetroleum.co	m PHONE: 575	-748-4272
For State Use Only	E-man address. <u>laur</u>	awyarespen oleum.co	<u>m</u> 1110NE. 3/3	-170-7212
APPROVED BY: Accepted for Record Only DATE				
Conditions of Approval (if any):	Missiown 8	11/2016		