Submit 1 Copy To Appropriate District	State of 1	20			Form (C-103	
Office <u>District I</u> – (575) 393-6161	ce					Revised July 18	8, 2013
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283				WELL API NO. 30-025-41602			
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION			30-025-41602 ~ 5. Indicate Type of Lease			
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.			STATE SFEE			
District IV - (505) 476-3460 Santa Fe, NM 87505 1220 S. St. Francis Dr., Santa Fe, NM				6. State Oil & Gas Lease No. VO-7363			
87505 SUNDRY NOTICES AND REPORTS ON WELLS					ama an Linit	A ano any ant N	
(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-10) MORSECH D PROPOSALS.)				Caravan Si	ame or Unit A tate Unit	Agreement N	anne
				8. Well Number			
1. Type of Well: Oil Well	Gas Well 🗌 Other	8H /					
2. Name of Operator	JAN 2 3 2015			9. OGRID Number			
Yates Petroleum Corporation	/			025575 10. Pool name or Wildcat			
3. Address of Operator 105 South Fourth Street, Artesia, NM 88210				Triste Draw; Bone Spring, East			
4. Well Location					.,		
Unit Letter D :	50 feet from the	North	line and 4	150 fe	et from the	West	line
Unit Letter M	230 feet from the	South			et from the	West	line
Section 33	Township 24	4S Range	33E	NMPM	Lea	County	F
11. Elevation (Show whether DR, RKB, RT, GR, etc.)							
3,480'							
12. Check	Appropriate Box to Ind	dicate Natu	re of Notice. F	Report or (Other Data		
NOTICE OF INTENTION TO: SUBSEQUEN							~ —
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A						RING CASIN	GЦ
OTHER: OTHER: Name change							
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of							
or starting any proposed work). SEE ROLE 19.13.7.14 NMAC. For Multiple Completions: Attach welloore diagram of proposed completion or recompletion.							
F F							
Former well name: Caravan State	Unit #8H						
New well name: Caravan BVW State #8H 31444							
Effective: 1/2015							
Spud Date:	Rig R	elease Date:]		
5/12/14			6/	12/14			
					j		
I hereby certify that the information	above is true and complet	e to the best o	of my knowledge	and belief.			
1	Λ						
SIGNATURE QUALS	Natto TITL	E <u>Regulate</u>	ory Reporting Te	chnician	DATE <u>Janı</u>	uary 21, 2015	5
Type or print name <u>Laura Watts</u> E-mail address: <u>laura@yatespetroleum.com</u> PHONE: <u>575-748-4272</u>							
Type or print name <u>laura V</u> For State Use Only	<u>raus</u> E-mail add	icss. <u>laura</u>	wyatespetroleum			<u>575-748-427</u>	
Detroleum Engineer Allag II							
APPROVED BY:							
Conditions of Approval (II ally):	r						

,

JAN 26 2015

gn