Submit 1 Copy To Appropriate District	State of	New Mexico		Form C-103
Office District I – (575) 393-6161		and Natural Resources	Re	vised 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		30-025-41745 5. Indicate Type of Lease	
District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410		St. Francis Dr.		EE
District IV - (505) 476-3460	Santa Fe	e, NM 87505	6. State Oil & Gas Lease 1	No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			VB-1637	
	TICES AND REPORTS ON		7. Lease Name or Unit Ag	reement Name
(DO NOT USE THIS FORM FOR PROP DIFFERENT RESERVOIR. USE "APPI			Toucan BUY State	
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well 🗌 Other	HOBBSOCD	8. Well Number 1H	1
2. Name of Operator		- - - -	9. OGRID Number	
Yates Petroleum Corporation	<u> </u>	APR 1 3 2015	025575	
3. Address of Operator	NIM 00010		10. Pool name or Wildcat	
105 South Fourth Street, Artesia,	INIVI 88210	RECEIVED	San Simon; Bone Sprin	g, Northeast
4. Well Location Unit Letter D :	200 feet from the	North line and	660 feet from the	West line
Unit Letter M	330 feet from the	South line and	660 feet from the	West line
Section 27	Township 2	LIS Range 35E	NMPM Lea C	County /
		nether DR, RKB, RT, GR, e		A second s
		3,585' GR		
12 Charle	Annanista Davita In	dianto Notino of Notio	- Demont on Othern Dete	
12. Check	Appropriate Box to In	dicate Nature of Notic	e, Report or Other Data	
	NTENTION TO:		IBSEQUENT REPORT	OF:
PERFORM REMEDIAL WORK		—		
TEMPORARILY ABANDON	CHANGE PLANS MULTIPLE COMPL			А Ц
DOWNHOLE COMMINGLE				
CLOSED-LOOP SYSTEM]	_		
OTHER: 13 Describe proposed or con	anleted operations (Clearly		new hole and give pertinent dates, includ	ling estimated date
			Completions: Attach wellbore	
proposed completion or r	ecompletion.	-	-	-
4/3/15 – Made 5' new hole. TD 1	.05'. Hole size 20".			
Note: Set 30" culvert with locking	g device at 10' on 5/2/14.			
Smud Data: 3/27/	14 p: 1			
Spud Date: 5/2//		Release Date:		
I hereby certify that the information	n above is true and comple	te to the best of my knowle	dge and belief.	
	1	·		
SIGNATURE Taura	hatto TIT	E Pagulatory Paparting	<u>g Technician</u> DATE <u>April</u>	8 2015
SIGNATURE / DOUCE /	<u>//////</u> 111	LE <u>Regulatory Reporting</u>	<u>g recimician</u> DATE <u>April</u>	<u>8,2015</u>
Type or print name Laura		- · ·	eum.com PHONE: <u>57</u>	5-748-4272
For State Use Only Accep	ted for Record Or	niv		
APPROVED BY:	TITL	-	DATE	
Conditions of Approval (if any):				
			ATT 1 4 2	0.15

Mr
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