| Office Office | State of N | | | | | Form (| |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-----------------|-------------------|---------------------------------------------------------|---------------------------------|---------------------|----------------------|
| <u>District I</u> – (575) 393-6161 | Energy, Minerals a | nd Natu | ral Resources | WELL A | | Revised July 18 | 8, 2013 |
| 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283 | . (575) 748-1283 | | | 30-025- | | / | |
| 811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 | | | | 5. Indica | te Type of Leas | se | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | 1220 South St. Francis Dr. | | | STATE S FEE | | | |
| <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505 | Santa Fe, NM 87505 | | | 6. State Oil & Gas Lease No. VB-1881 | | | |
| SUNDRY NOTICES AND REPORTS ON WELLS | | | | 7. Lease Name or Unit Agreement Name Calabash BWC State | | | |
| (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.) 1. Type of Well: Oil Well | | | | 8. Well N | Number | / | |
| 2. Name of Operator IIII 9 7 2015 | | | | 1 | D Number | | |
| Yates Petroleum Corporation | | | | 02557 | name or Wilde | | |
| 3. Address of Operator 105 South Fourth Street, Artesia, N | NM 88210 | j | RECEIVED | | name or windc t; Bone Spring | аі | |
| 4. Well Location | | | WEOTIVED | | | | |
| Unit Letter D : | 200 feet from the | North | | | feet from the | West | line |
| Unit Letter M | 230 feet from the | South | line and | 660 1 | feet from the | West | line |
| Section 31 | Township 21 | | | NMPM | Lea | County | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,589' GR | | | | | | | |
| | Appropriate Box to Ind | icate Na | | - | | | |
| 1 | | | | | NT REPOR | | о П |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORTEMPORARILY ABANDON CHANGE PLANS COMMENCE DR | | | | | | RING CASIN | G [] |
| PULL OR ALTER CASING | | | CASING/CEMEN | | | <i>57</i> 1 | |
| DOWNHOLE COMMINGLE | | | | | | | |
| CLOSED-LOOP SYSTEM | | | OTHER: | E' nour hole | • | | I ⊠ |
| OTHER: 13. Describe proposed or comp | pleted operations. (Clearly | state all p | | 5' new hole nd give perti | | uding estimat | <u>⊠</u> ted date |
| | ork). SEE RULE 19.15.7.1 | | | | | | |
| | | | | | | | |
| 7/20/15 – Made 5' new hole. TD 10 | 0'. Hole size 6". | | | | | | |
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| | | | | | | | |
| Spud Date: 7/1/15 | Pig Re | elease Da | te: | | | | |
| Spud Date. | | cicase Da | | | | | |
| | | | | | | | |
| I hereby certify that the information | above is true and complete | to the be | st of my knowled | ge and belief | f. | | |
| SIGNATURE LOWE | a la tha | E Pagu | llatory Reporting | Tachnician | DATE July | , 22, 2015 | |
| 7/ | | | | | | | _ |
| Type or printiname <u>Laura W</u> For State Use Only | 7 - 44 - 12 - 13 - 13 - 13 - 13 - 13 - 13 - 13 | 1 | | | | | 2 |
| | • • • | ess: <u>lai</u> | ura@yatespetrolei | um.com | PHONE: | <u>575-748-427.</u> | <u> </u> |
| APPROVED BY: Accepted 1 | for Record Only | | ura@yatespetrole | | PHONE: | <u>575-748-4272</u> | <u> </u> |

JUL 27 2015