Office Submit 1 Copy 1	To Appropriate District	State of New Mexico			Form C-103			
District I - (575)		Energy, Minerals	and Natural	Resources	WELL A		Revised July	8, 2013
District II – (575	Dr., Hobbs, NM 88240 5) 748-1283	OIL CONGERNATION DIVIGION			30-025-			
811 S. First St.,	Artesia, NM 88210	OIL CONSERVATION DIVISION			5. Indicate Type of Lease			
District III – (50, 1000 Rio Brazos	Rd., Aztec, NM 87410	1220 South St. Francis Dr.			STATE FEE			
87505	cis Dr., Santa Fe, NM	Santa Fe, NM 87505			6. State Oil & Gas Lease No. VB-2066			
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.)  1. Type of Well: Oil Well  Gas Well  Other					7. Lease Name or Unit Agreement Name Nectarine BSQ State Com			
PROPOSALS.)					8. Well N	lumber		
1. Type of W	/ell: Oil Well ⊠ G	as Well Other	1111	CD	2H			
1. Type of Well: Oil Well Gas Well Other  2. Name of Operator  Yates Petroleum Corporation  2. Address of Operator						D Number		
3. Address of Operator					025575  10. Pool name or Wildcat			
Yates Petroleum Corporation  3. Address of Operator 105 South Fourth Street, Artesia, NM 88210					Berry; Bone Spring, North			
4. Well Loca	ation			50				
S- Unit Lette Unit Lette		feet from the feet from the	South North	line and		eet from the eet from the	West West	line line
5 - Section	24	Township 2	21S Range	33E	NMPM	Lea	County	
Section	13	Township 2	21S Range	33E	<b>NMPM</b>	Lea	County	
		11. Elevation (Show wh			:.)			
			3,784' G	R				
	12. Check Ap	propriate Box to In	dicate Nati	ire of Notice	, Report or	Other Data		
TEMPORARI PULL OR AL DOWNHOLE CLOSED-LOG OTHER:  13. Descr of star propo  7/19/16 – Mad the surface. TI	LY ABANDON	s). SEE RULE 19.15.7. inpletion. hole to 36". Set 10' of	state all per	For Multiple Co	SILLING OPN NT JOB  5' new hound give pertinoproper pertin	le nent dates, incl	luding estima re diagram of	□ ⊠_ated date
Spud Date:	6/30/16	Rig F	Release Date:					
I hereby certify	that the information ab	ove is true and complet	e to the best	of my knowleds	ge and belief.			
ora ka ar	3 600 1.0	r	1					
SIGNATURE	four Wa	tts	LE Advance	ed Regulatory I	Reporting An	alyst DATE	EJuly 26, 2	2016
Type or print		s E-mail add	lress: laura	@yatespetroleu	ım.com	PHONE:	575-748-427	2
For State Use	Only	Accomtad for D						
APPROVED E	BY:	Accepted for Re	cord Only			DATE		
	Approval (if any):	MANR LAND	7/28/	2011-				
		MADIOCIS	1/20/	2016				