Office	tate of New Mexico	Form C-103
District II – (575) 393-6161  District II – (575) 748-1283 B11 S. First St., Artesia, NM 88210  District III – (505) 334-6178  1000 Rio Brazos Rd., Aztec, NM 874 10N  District IV – (505) 476-3460  District IV – (505) 476-3460  District IV – (505) 876-3460  District IV – (505) 876-3460		Revised August 1, 2011  WELL API NO. 30-025-40518  5. Indicate Type of Lease STATE FEE
		6. State Oil & Gas Lease No. VB-1220
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.)		7. Lease Name or Unit Agreement Name Tangerine BRT State  8. Well Number
1. Type of Well: Oil Well Gas Well Other		1H
2. Name of Operator		9. OGRID Number
Yates Petroleum Corporation  3. Address of Operator		025575  10. Pool name or Wildcat
105 South Fourth Street, Artesia, NM 88210		Featherstone; Bone Spring
4. Well Location Unit Letter A: 100 feet from the North line and 660 feet from the East line Unit Letter P: 330 feet from the South line and 660 feet from the East line Section: 27 Township 20S Range 35E NMPM Lea County  11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3667'GR		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO PERFORM REMEDIAL WORK  PLUG AND AB TEMPORARILY ABANDON CHANGE PLAI PULL OR ALTER CASING MULTIPLE CO DOWNHOLE COMMINGLE	ANDON  REMEDIAL WOR COMMENCE DRI	ILLING OPNS. P AND A
OTHER:	OTHER: Made 5	
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 proposed completion or recompletion.		
12/21/12 – Made 5' new hole at 8:46 AM. TD 35'. Hemail.	Hole size 12-1/4". Notified E.L. Gonz	zales NMOCD-Hobbs of operations via
Spud Date: 8/31/12	Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE TITLE Regulatory Reporting Supervisor DATE January 8, 2013		
Type or print name E-mail address: tinah@yatespetroleum.com PHONE: 575-748-4168		
APPROVED BY: DATE 1-10-2013		
Conditions of Approval (if any):		Open