| Office State of New Mexico   | Form C-103   |
|--|--|
| District I – (575) 393-6161 Energy, Minerals and Natural Resources   | Revised July 18, 2013                                    |
| 1625 N. French Dr., Hobbs, NM 88240  | WELL API NO.<br>30-025-40518                             |
| <u>District II</u> – (575) 748-1283<br>811 S. First St., Artesia, NM 88210  OIL CONSERVATION DIVISION  | 5. Indicate Type of Lease                                |
| District III - (505) 334-6178 <b>MARS OCD</b> 220 South St. Francis Dr.  | STATE FEE  |
| 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV – (505) 476-3460 Santa Fe, NM 87505  | 6. State Oil & Gas Lease No.                             |
| 1220 S. St. Francis Dr., Santa Fe, NM JUN 0 3 2014   | VB-1220  |
| 07505  |  |
| 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 PERMIT" (FORM C-101) FOR SUCH   | 7. Lease Name or Unit Agreement Name Tangerine BRT State |
| PROPOSALS.)  1. Type of Well: Oil Well  Gas Well  Other  | 8. Well Number   |
| 2. Name of Operator  | 9. OGRID Number  |
| Yates Petroleum Corporation  | 025575   |
| 3. Address of Operator   | 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  |  |
| 3007 UK  |  |
| 12. Check Appropriate Box to Indicate Nature of Notice,  | Papart or Other Data                                     |
| 12. Check Appropriate Box to indicate Nature of Notice,  | Report of Other Data                                     |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:  |  |
| PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐   |  |
| TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐ P AND A ☐  |  |
| PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMEN   | T JOB  |
| DOWNHOLE COMMINGLE   |  |
| CLOSED-LOOP SYSTEM   |  |
| OTHER: OTHER: 5' new   |  |
| 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.   |  |
| proposed completion of recompletion.   |  |
|  |  |
|  |  |
| 5/31/14 - Made 5' new hole. TD 175'. Hole size 12". Notified Maxey Brown NMOCD-Hobbs of operations via email   |  |
|  |  |
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|  |  |
| 0/01/10  |  |
| Spud Date: 8/31/12 Rig Release Date:   | ,  |
| 1  |  |
|  |  |
| I hereby certify that the information above is true and complete to the best of my knowledg  | e and belief.  |
| 1  |  |
| $\frac{1}{2}$  |  |
| SIGNATURE TITLE Regulatory Reporting Technician DATE June 2, 2014  |  |
| Time on mind normal Laure Water Empire Advance laure Querte et al.   | DHONE: 575 749 4272                                      |
| Type or print name Laura Watts E-mail address: laura@yatespetroleur  | m.com PHONE: <u>575-748-4272</u>                         |
| For State Use Only   |  |
| APPROVED BY: A: cepted for Record Only   | DATE   |
| Conditions of Approval (if any):   |  |
| MDB 1011, 17014  |  |
| VINOR OF LOCAL   | (  |