Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103	
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources		Revised 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		30-025-41702 5. Indicate Type of Lease	
<u>District III</u> - (505) 334-6178	1220 South St. Francis Dr.		STATE FEE	
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505		6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM			VB-1638	
(DO NOT USE THIS FORM FOR PROP DIFFERENT RESERVOIR. USE "APPL PROPOSALS.) 1. Type of Well: Oil Well 2. Name of Operator Yates Petroleum Corporation	CONTROL OF COLUMN COLUM	OR PLUG BACK TO A	 7. Lease Name or Unit Agree Cable BVL State 8. Well Number 1H 9. OGRID Number 025575 	ment Name
3. Address of Operator			10. Pool name or Wildcat	
105 South Fourth Street, Artesia,	NM 88210	RECEIVED	Rock Lake; Bone Spring	
4. Well Location Unit Letter M: Unit Letter L Section 22	2310 feet from the Township 22S 11. Elevation (Show whether	South line and South line and Range 35E er DR, RKB, RT, GR, etc 3,559' GR	660 feet from the W NMPM Lea Cour	The second secon
12 (1 1	A '	A NI A CNI A'	D 4 04 D 4	
12. Check	Appropriate Box to Indica	ate Nature of Notice,	Report or Other Data	
NOTICE OF I	NTENTION TO:	SUE	SEQUENT REPORT OF	= :
PERFORM REMEDIAL WORK			•	CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DR	RILLING OPNS. P AND A	
PULL OR ALTER CASING] MULTIPLE COMPL [CASING/CEMEN	IT JOB . □ . ··· ··· .	
DOWNHOLE COMMINGLE				
CLOSED-LOOP SYSTEM]	OTUED CL	ing the second of the second o	
OTHER:	unleted operations (Clearly star		w hole and give pertinent dates, including	estimated date
	work). SEE RULE 19.15.7.14 N		empletions: Attach wellbore diag	
8/25/14 – Made 5' new hole. TD 45'. Hole size 20".				
Note: 30" culvert with locking dev	vice was installed on 5/5/14			
Note. 30 Curvert with locking dev	vice was installed on 3/3/14.			£
Sand Detail 3/28/1	14	.		
Spud Date:	Rig Relea	ase Date:		
				
I hereby certify that the information	n above is true and complete to	the best of my knowleds	ge and helief	
Thereby certify that the information	a above is true and complete to	the dest of my knowleds	50 and bonoti,	
			en e	
SIGNATURE JOHNS	(atts) TITLE	Regulatory Reporting	Fechnician DATE August 20	6, 2014
	; ;		DIIAND 45	40 4050
Type or print/name Laura V	Vatts E-mail address	: <u>laura@yatespetroleu</u>	<u>m.com</u> PHONE: <u>575-7</u> 2	<u> 18-4272</u>
For State Use Only	• <u>-</u>			•
APPROVED BY: Accepted	for Record Only LE		DATE	•