Submit 1 Copy To Appropriate District State of New Mexico	Form C-103
Office	Revised July 18, 2013
District 1 – (575) 393-6161 Energy, Minerals and Natural Resources, 1625 N. French Dr., Hobbs, NM 88240	DWELL API NO.
District II - (575) 748-1283	30-025-40518
811 S. First St., Artesia, NM 88210OIL CONSERVATION DIVISIONDistrict III - (505) 334-61781220 South St. Francis Dr. DEC 091000 Dir Drong Bd. Artes NM 874101220 South St. Francis Dr. DEC 09	25 Andicate Type of Lease
1000 Rio Brazos Rd., Aziec, NM 87410 Sonto Eo. NM 97505	STATE FEE
District IV - (505) 476-3460 Santa Fe, NM 87505 1220 S. St. Francis Dr., Santa Fe, NM Difference	6. State Oil & Gas Lease No.
87505	VB-1220
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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	Tangerine BRT State
PROPOSALS.)	8. Well Number
1. Type of Well: Oil Well 🛛 Gas Well 🗌 Other	IH
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	•
	660 feet from the East line
Unit Letter <u>P</u> <u>330</u> feet from the <u>South</u> line and	660 feet from the <u>East</u> 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: SUB	SEQUENT REPORT OF:
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT	·
DOWNHOLE COMMINGLE	
CLOSED-LOOP SYSTEM	
OTHER: OTHER: 5' new f	nole
13. Describe proposed or completed operations. (Clearly state all pertinent details, and	
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Cor	npletions: Attach wellbore diagram of
proposed completion or recompletion.	
·	
12/7/14 – Made 5' new hole. TD 225'. Hole size 12".	
12/7/14 = 14 and 5 from hole. $10/223$. Hole size 12 .	
Spud Date: 8/31/12 Rig Release Date:	
Spud Date: Rig Release Date:	
I have here with that the information shows is true and complete to the best of my knowledge	and haliaf
I hereby certify that the information above is true and complete to the best of my knowledge	e and bener.
SIGNATURE TADAS TITLE Regulatory Reporting T	echnician DATE December 8, 2014
	<u> </u>
Type or print name <u>Laura Watts</u> E-mail address: <u>laura@yatespetroleur</u>	n.com PHONE: <u>575-748-4272</u>
For State Use OnAccepted for Record Only	
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APPROVED BY:TITLE Conditions of Approval (if any):	DATE

DEC 1 0 2014
