

Submit 1 Copy To Appropriate District Office
District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

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.)		WELL API NO. 30-025-41641
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Yates Petroleum Corporation		6. State Oil & Gas Lease No. VO-7363
3. Address of Operator 105 South Fourth Street, Artesia, NM 88210		7. Lease Name or Unit Agreement Name Caravan BVW State
4. Well Location Unit Letter C : 50 feet from the North line and 1950 feet from the West line Unit Letter N : 331 feet from the South line and 1947 feet from the West line Section 33 Township 24S Range 33E NMPM Lea County		8. Well Number 9H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,483' GR		9. OGRID Number 025575
		10. Pool name or Wildcat Triste Draw; Bone Spring, East

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: Completion operations <input checked="" type="checkbox"/>
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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.

12/28/14 - Ran log from 11,275' to the surface.

1/5/15 - Tested casing to 3000 psi for 30 mins, good. Opened toe sleeve at 15,769'. Pumped 1500 gals of 15% HCL acid. Displaced hole with 444 bbls of 3% KCL with Oxygen Scavenger and Corrosion Inhibitor.

1/22/15-2/2/15 - Acidized toe sleeve and frac sleeves 11,998' - 15,665' with 84,500 gallons 15% HCL acid, frac with a total of 3,415,124# 20/40 Econo prop.

2/18/15 - Set a AS-1 10K packer at 10,413'. Pressure tested casing to 1000 psi for 15 mins, held good.

2/19/15 - Set 2-7/8" 6.50# L-80 tubing at 10,413'.

Note: Frac sleeves at 11,385', 11,488', 11,590', 11,692', 11,793' and 11,895' have not been opened.

Spud Date: 10/18/14 Rig Release Date: 11/23/14

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Laura Watts TITLE Regulatory Reporting Technician DATE March 3, 2015

Type or print name Laura Watts E-mail address: laura@yatespetroleum.com PHONE: 575-748-4272
For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 03/06/15
Conditions of Approval (if any):

MAR 10 2015