

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

WELL API NO. 30-025-41610
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VB-0647
7. Lease Name or Unit Agreement Name Caravan BVV State
8. Well Number 6H
9. OGRID Number 025575
10. Pool name or Wildcat Triste Draw; Bone Spring, East

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.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator Yates Petroleum Corporation	
3. Address of Operator 105 South Fourth Street, Artesia, NM 88210	
4. Well Location Unit Letter C : 50 feet from the North line and 1980 feet from the West line Unit Letter C : 330 feet from the North line and 1976 feet from the West line Section 33 Township 24S Range 33E NMPM Lea County Section 28 Township 24S Range 33E NMPM Lea County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,469' GR	

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐  
CLOSED-LOOP SYSTEM ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐  
OTHER Completion operations ☒

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.

1/28/15 - Ran GR/CCL/CBL from 11,328' to the surface.

12/29/15 - Pressure tested casing to 3000 psi for 30 mins, good. Opened toe sleeve at 15,853'. Pumped 1500 gallons of 15% HCL NEFE acid. Displaced hole with 464 bbls of 3% KCL with Oxygen Scavenger and Corrosion Inhibitor.

2/9-15/15 - Acidized toe sleeve and frac sleeves 11,373' - 15,853' with 209,000 gallons 15% HCL acid, frac with a total of 4,824,640# 20/40 and 30/50 Propmaster sand.

2/19/15 - Pressure tested casing to 1000 psi for 15 mins, held good. AS1-X packer and 2-7/8" 6.50# L-80 tubing at 10,492'.

Spud Date:

10/17/14

Rig Release Date:

12/15/14

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 6, 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 03/13/15  
Conditions of Approval (if any):

MAR 17 2015