| Submit 1 Copy To Appropriate District Office | State of New Mexico | | Form C-103 | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-------------------------|------------------------------|-----------------------------------------|
| <u>District I</u> – (575) 393-6161 | Energy, Minerals and Na | atural Resources | | Revised July 18, 2013 |
| 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283 | | | WELL API NO. 30-025-41458 | <i></i> |
| 811 S. First St., Artesia, NM 88210 | OIL CONSERVATION DIVISION | | 5. Indicate Type of Lea | - / |
| District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 | 1220 South St. Francis Dr. | | STATE STATE | FEE 🗍 |
| District IV – (505) 476-3460 | Santa Fe, NM | 87505 | 6. State Oil & Gas Leas | |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | VB-1519 | |
| SUNDRY NOT | 7. Lease Name or Unit | Agreement Name | | |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A | | | Tour BUS State Con | |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) | | 8. Well Number | | |
| 1. Type of Well: Oil Well | Gas Well Other | | 1H | |
| 2. Name of Operator | | MAY 2 1 2015 | 9. OGRID Number | |
| Yates Petroleum Corporation | | WINI & I LOID | 025575 | |
| 3. Address of Operator | NIN # 00210 | | 10. Pool name or Wilde | |
| 105 South Fourth Street, Artesia, 1 | NIVI 88210 | RECEIVED | Ojo Chiseo; Bone Sp | oring |
| 4. Well Location Unit Letter N: | 200 feet from the So | outh line and | 2180 feet from the | West line |
| Unit Letter C | | | 1980 feet from the | West line |
| | | | | |
| Section 23 Township 22S Range 34E NMPM Lea County 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | | | | |
| 3,433 GR | | | | |
| 5,435 GR | | | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | | |
| | | | | |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: | | | | |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING | | | | |
| TEMPORARILY ABANDON | <u> </u> | COMMENCE DR | | ID A |
| PULL OR ALTER CASING | | CASING/CEMEN | T JOB 🔲 | |
| DOWNHOLE COMMINGLE | | | | |
| CLOSED-LOOP SYSTEM | · | OTHER: 5' new | holo | ⋈ |
| OTHER: 13 Describe proposed or com | nleted operations (Clearly state a | | | luding estimated date |
| 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. | | | | |
| | | | | |
| 5/16/15 Made 52 new hole TD 1 | 55' Hologino 10" | | | |
| 5/16/15 – Made 5' new hole. TD 155'. Hole size 12". | | | | |
| | | | | |
| | | | | |
| | | | | |
| Note: 30" culvert with locking device was installed on 11/20/13. | | | | |
| | | | | |
| | | | | |
| 11/1/12 | | | | |
| Spud Date: 11/1/13 | Rig Release | Date: | · | |
| | | | | |
| | | | | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. | | | | |
| D . | 1 | | | |
| SIGNATURE / Dure / | () () TITLE R | egulatory Reporting T | echnician DATE <u>Ma</u> | ıv 19. 2015 |
| // | THE I | toguiator j Reporting 1 | DITT IVIC | ., .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| Type or print name Laura W | Vatts E-mail address: | laura@yatespetroleu | m.com PHONE: | 575-748-4272 |
| For State Use Only | | | | , , |
| ADDROVED DV. Account- | Some Trime of | | DATE | oghilis |
| APPROVED BY: Accepted Conditions of Approval (if any): | TOT Record Only | | DATE | - ' ' ' ' (1) |