| Submit 1 Copy To Appropriate District Office   | State of New Mexico                    |  | Form C-10  | 03 |
|--|--|--|--|----|
| <u>District I</u> – (575) 393-6161   | Energy, Minerals and Natural Resources |  | Revised July 18, 20                                      | 13 |
| 1625 N. French Dr., Hobbs, NM 88240<br>District_II – (575) 748-1283  | OIL CONSERVATION DIVISION              |  | WELL API NO.<br>30-025-40556                             |    |
| 811 S. First St., Artesia, NM 88210  |  |  | 5. Indicate Type of Lease                                |    |
| District III – (505) 334-6178<br>1000 Rio Brazos Rd., Aztec, NM 87410  | 1220 South St. Francis Dr.             |  | STATE S FEE  |    |
| District IV - (505) 476-3460   | Santa Fe, NM 87505                     |  | 6. State Oil & Gas Lease No.                             | _  |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>87505   |  |  | VO-3662/VB-1647  |    |
| 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  |  |  | 7. Lease Name or Unit Agreement Name Sitka BSI State Com | :  |
| PROPOSALS.)  1. Type of Well: Oil Well   | Gas Well  Other                        | HOBBS OCD  | 8. Well Number 1H  |    |
| 2. Name of Operator  |  |  | 9. OGRID Number  |    |
| Yates Petroleum Corporation  |  | OCT 0 5 2015   | 025575   |    |
| 3. Address of Operator   | NIN                                    | <b>Q</b> 0. 0 3  | 10. Pool name or Wildcat                                 |    |
| 105 South Fourth Street, Artesia,  | NM 88210                               | RECEIVED   | Grama Ridge; Bone Spring, North                          |    |
| 4. Well Location Unit Letter Lot 14/F:   | 2680 feet from the                     | • •  | 1650 feet from the West lin                              |    |
| Unit Letter F  | <del></del>                            | South line and location line and location line and location line and location locati | 1650 feet from the West lin<br>feet from the West lin    |    |
| Section 4  | Township 21S                           | Range 34E  | NMPM Lea County  | _  |
| Section 9  | Township 21S                           | Range 34E  | NMPM Lea County  | _  |
|  | 11. Elevation (Show whether            |  |  |    |
|  | 3                                      | ,708' GR   |  |    |
|  |  |  |  |    |
| 12. Check  | Appropriate Box to Indica              | te Nature of Notic   | e, Report or Other Data                                  |    |
| NOTICE OF I  | NTENTION TO:                           | Su   | BSEQUENT REPORT OF:                                      |    |
| PERFORM REMEDIAL WORK  |  | REMEDIAL WO  |  | ]  |
| TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS PAND A COMMENCE DRILLING PAND A COMMENCE |  |  |  |    |
| PULL OR ALTER CASING  MULTIPLE COMPL  CASING/CEMENT JOB  |  |  |  |    |
| DOWNHOLE COMMINGLE   | ]                                      |  |  |    |
| · CLOSED-LOOP SYSTEM / · · [<br>· OTHER:   |  | OTHER 5'r  | new hole   | 1  |
| 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.   |  |  |  |    |
|  |  |  |  |    |
|  |  |  |  |    |
| 9/29/15 - Made 5' new hole. TD 175'. Hole size 11".  |  |  |  |    |
|  |  |  |  |    |
| Note: 4/15/14 – Installed and cem  | ented a 30" culvert nine with a l      | nckina device  |  |    |
| The state of the s |  |  |  |    |
|  |  |  |  |    |
|  |  |  |  |    |
| Spud Date: 3/27/   | Rig Releas                             | e Date:  |  |    |
| Space Date.  | Kig Keleas                             | be Bute.   |  |    |
|  |  |  |  |    |
| I hereby certify that the information  | n above is true and complete to t      | he best of my knowled  | dge and belief.  |    |
| " 1 - 1 1  |  |  |  |    |
| SIGNATURE AT   | 11 attack                              | n lata n   | Technician DATE September 30, 2015                       |    |
| SIGNATURE / () A   | HOLOGO - HILE -                        | kegulatory keporting   |  |    |
| Type or print name Laura V   | Vatts E-mail address:                  | laura@yatespetrole   | eum.com PHONE: 575-748-4272                              | •  |
| For State Use Only   |  |  |  |    |
| Accep  | ted for Record Only                    |  | <b>5</b> 4 5 5 7   |    |
| APPROVED BY: Conditions of Approval (if any):  | A Militar                              |  | DATE   | _  |
| Conditions of Approval (II ally).  |  |  |  |    |