| | | New Me | | | Submit Form C-1 |
|--|---------------------------------|---|---|-------------------------------------|--------------------------------|
| Office District I – (575) 393-6161 1625 N. French Dr. Hobbs, NM 88240 | Energy, Minerals a | and Natu | ral Resources | WELL API NO. | Revised July 18, 20 |
| 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283 | OIL CONCEDIVATION DIVISION | | 30-025-42477 | | |
| 811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 | | OIL CONSERVATION DIVISION 1220 South St. Francis Dr. | | 5. Indicate Type | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | | | | | FEE |
| <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505 | Santa Fe, NM 87505 | | 7505 | 6. State Oil & Ga VB-1881 | s Lease No. |
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCCESSION OF THE PROPOSALS TO DIFFERENT RESERVOIR. | | | 7. Lease Name or Calabash BWC | Unit Agreement Name State | |
| PROPOSALS.) 1. Type of Well: Oil Well | Gas Well Other | 4 C-101) FC | or Monos | 8. Well Number 1H | 1 |
| Name of Operator Yates Petroleum Corporation | / | | OCT 0 8 5012 | 9. OGRID Numb 025575 | er |
| Address of Operator South Fourth Street, Artesia, | NM 88210 | | RECEIVED | 10. Pool name or Wildcat; Bone S | |
| 4. Well Location | | | | | |
| Unit Letter D : : | 200 feet from the feet from the | North South | | feet from feet from | |
| Section 31 | Township 21 | 1S Rai | nge 34E | NMPM Lea | County |
| | 11. Elevation (Show who | ether DR, 3,589 | | | |
| 12 Charle | Ammanuista Dan ta Ind | l: t - NI | atoma af Nation | Danast an Other | Dete |
| | Appropriate Box to Ind | iicate N | | • | |
| | | | | SEQUENT REI | |
| PERFORM REMEDIAL WORK TEMPORARILY ABANDON | PLUG AND ABANDON CHANGE PLANS | | REMEDIAL WORK ALTERING CASING COMMENCE DRILLING OPNS. P AND A | | |
| PULL OR ALTER CASING | | | CASING/CEMENT | | I AND A |
| DOWNHOLE COMMINGLE | | _ | | | |
| CLOSED-LOOP SYSTEM |] | | OTHER. | | - |
| OTHER: 13. Describe proposed or com | inleted operations (Clearly | state all r | OTHER: | 5' new hole | s including estimated |
| | work). SEE RULE 19.15.7.1 | | | | |
| | | | | | |
| 10/2/15 - Reamed hole to 36" set a | nd cemented 10' of 30" cul- | vert with | locking ring. Made | 5' new hole. TD 3 | 0'. Hole size 20". |
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| Spud Date: 7/1/15 | Rig Ro | elease Da | ite: | | |
| Spud Date: 7/1/15 | Rig Ro | elease Da | ite: | | |
| Spud Date: 7/1/15 I hereby certify that the information | Kig Ki | | | e and belief. | |
| Spud Date: | Kig Ki | | | e and belief. | |
| Spud Date. | n above is true and complete | e to the be | | | October 5, 2015 |
| I hereby certify that the information SIGNATURE Type or print name Laura V | n above is true and complete | e to the be | est of my knowledge | echnician DATE | October 5, 2015 E:575-748-4272 |
| I hereby certify that the information SIGNATURE Jame Type or print name Laura V For State Use Only | n above is true and complete | E Reguress: la | est of my knowledge | echnician DATE | E:575-748-4272 |

OCT 1 8 2015

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