Submit 1 Copy To Appropriate District Office	## State of New Mexico Strict I		Form C-103
District I - (575) 393-6161			Revised July 18, 2013 L API NO.
District II - (575) 748-1283			025-42733
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178			dicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410			STATE FEE
1220 S. St. Francis Dr., Santa Fe, NM 87505			ate Oil & Gas Lease No. -1917
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			ease Name or Unit Agreement Name
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other			ell Number
2. Name of Operator	Gas well Other	OFF W	GRID Number
Yates Petroleum Corporation		02	5575
3. Address of Operator	NR 6 00010	A STATE OF THE PARTY OF THE PAR	ool name or Wildcat
105 South Fourth Street, Artesia,	, NM 88210	Wil	dcat; Lower Bone Spring
4. Well Location Unit Letter C :	200 feet from the North 330 feet from the South	_	feet from the West line
		line and1980	feet from the West line
Section 20 Township 26S Range 36E NMPM Lea County 11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
2,943' 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 ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐ P AND A ☐			
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB			
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM			
CLOSED-LOOP SYSTEM [OTHER:		OTHER: 5' new hol	le 🖂
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.			
12/2/15 – Made 5' new hole. TD 30'. Hole size 20".			
Note: 30" culvert with locking lid	l installed on 10/26/15.		
0/1/1			
Spud Date: 9/1/1	Rig Release Dat	te:	
I house costifut that the information	an above is two and complete to the ba-	at a famoula dan and ha	-W-E
I hereby certify that the information	on above is true and complete to the be	st of my knowledge and be	mer.
1_	1.		
SIGNATURE CAUSE	TITLE Regu	latory Reporting Technicia	DATE December 3, 2015
Type or print name Laura Watts E-mail address: laura@yatespetroleum.com PHONE: 575-748-4272			
Type or print name Laura Watts E-mail address: laura@yatespetroleum.com PHONE: 575-748-4272 For State Use Only			
Accent	ted for Record Only		
APPROVED BY: Accepted for Record Only			DATE
Conditions of Approval (if any):			