Submit I Copy To Appropriate District Office	State of New Mexico	Form C-103
District I – (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240	TION TO S	WELL API NO.
District II – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-025-42445
District III – (505) 334-6178	1220 Courth St. Engagin Da	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	16 STATE FEE
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	RECEIVED	6. State Oil & Gas Lease No.
87505	110001100	VO-8714
SUNDRY NOT	TICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
	OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	Lychee BWS State Com
PROPOSALS.)	ICATION FOR PERMIT" (FORM C-101) FOR SUCH	8. Well Number
1. Type of Well: Oil Well	Gas Well Other	1H
2. Name of Operator	out were a context	9. OGRID Number
Yates Petroleum Corporation		025575
3. Address of Operator		10. Pool name or Wildcat
105 South Fourth Street, Artesia,	NM 88210	Berry; Bone Spring, South
4. Well Location		1 0
Unit Letter O :	200 feet from the South line and	1980 feet from the East line
Unit Letter J	2310 feet from the South line and	1980 feet from the East line
Section 22	Township 21S Range 34E	NMPM Lea County
Section 15	Township 21S Range 34E	NMPM Lea County
A DESCRIPTION OF THE PROPERTY	11. Elevation (Show whether DR, RKB, RT, GR, etc. 3,684' GR	
	3,064 UK	
	Appropriate Box to Indicate Nature of Notice,	
	pleted operations. (Clearly state all pertinent details, an rork). SEE RULE 19.15.7.14 NMAC. For Multiple Cocompletion.	new hole and give pertinent dates, including estimated date
Note: 30" culvert with locking lid	set and cemented at 10' on 5/22/15.	
Note. 30 curvett with locking lid	set and cemented at 10° on 3/22/13.	
Spud Date: 3/30/	Rig Release Date:	
I hereby certify that the information	above is true and complete to the best of my knowledg	re and belief
Thereby certify that the information	above is the and complete to the best of my knowledge	ge and benefi.
DOWN OUT CONTRACT		
SIGNATURE ANAL	TITLE Regulatory Reporting T	Cechnician DATE January 4, 2016
		The second secon
Type or print name Laura W	/atts E-mail address: laura@yatespetroleu	m.com PHONE: 575-748-4272
For State Use Only	ted for Boosel Only	
Accep	ted for Record Only	
APPROVED BY:	TITLE	DATE
Conditions of Approval (if any):	JAN 0 6	
		2018
		\(\lambda\)

or