Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I – (575) 393-6161 Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283 811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 CEVED 1220 South St. Francis Dr. District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505		WELL API NO.
		30-025-42477
		5. Indicate Type of Lease STATE FEE
		6. State Oil & Gas Lease No. VB-1881
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 Calabash BWC State 8. Well Number
PROPOSALS.) 1. Type of Well: Oil Well Gas V	Well Other	1H
2. Name of Operator		9. OGRID Number
Yates Petroleum Corporation		025575
3. Address of Operator 105 South Fourth Street, Artesia, NM 88	3210	10. Pool name or Wildcat Wildcat; Bone Spring
4. Well Location		
Unit Letter D : 200 Unit Letter M 230	feet from the North line and line and	660 feet from the West line 660 feet from the
Section 31		
Section 31 Township 21S Range 34E NMPM Lea County 11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
3,589' 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 COMMENCE DRILLING OPNS. P AND A		
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM	The state of the s	
CLOSED-LOOP SYSTEM OTHER:	□ OTHER:	5' new hole
13. Describe proposed or completed	SEE RULE 19.15.7.14 NMAC. For Multiple	and give pertinent dates, including estimated date
6/1/16 - Made 5' new hole. TD 115'. Hole size 20".		
Note: 30" culvert with locking ring install	led on 10/2/15.	
Smud Date: 7/1/15		
Spud Date: //1/13	Rig Release Date:	
I hereby certify that the information above	is true and complete to the best of my knowle	edge and helief
	is the and complete to the best of my known	and benefit
SIGNATURE TOURS /	atts TITLE Regulatory Reportin	g Technician DATE June 3, 2016
BOUT COLO / DE LES COLO		
Type or print name Laura Watts For State Use Only	E-mail address: laura@yatespetro	leum.com PHONE: <u>575-748-4272</u>
APPROVED BY:	AC depted for Record Only	DATE
Conditions of Approval (if any):		DATE
	MIB/OCD 6/8/2014	
	6/8/2014	