

PTG-W

ABOVE THIS LINE FOR DIVISION USE ONLY

**NEW MEXICO OIL CONSERVATION DIVISION**  
 - Engineering Bureau -  
 1220 South St. Francis Drive, Santa Fe, NM 87505



Yates 25575  
 RECEIVED OGD #14  
 #7  
 #5  
 DOC BHM State Com 54

**ADMINISTRATIVE APPLICATION CHECKLIST** 30-015-34552

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

30-05-39792

**Application Acronyms:**

- [NSL-Non-Standard Location] [NSP-Non-Standard Proration Unit] [SD-Simultaneous Dedication]
- [DHC-Downhole Commingling] [CTB-Lease Commingling] [PLC-Pool/Lease Commingling]
- [PC-Pool Commingling] [OLS - Off-Lease Storage] [OLM-Off-Lease Measurement]
- [WFX-Waterflood Expansion] [PMX-Pressure Maintenance Expansion]
- [SWD-Salt Water Disposal] [IPI-Injection Pressure Increase]
- [EOR-Qualified Enhanced Oil Recovery Certification] [PPR-Positive Production Response]

[1] **TYPE OF APPLICATION** - Check Those Which Apply for [A]

- [A] Location - Spacing Unit - Simultaneous Dedication  
 NSL  NSP  SD

0-5-255-30E

Check One Only for [B] or [C]

- [B] Commingling - Storage - Measurement  
 DHC  CTB  PLC  PC  OLS  OLM

- [C] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery  
 WFX  PMX  SWD  IPI  EOR  PPR

- [D] Other: Specify \_\_\_\_\_

[2] **NOTIFICATION REQUIRED TO:** - Check Those Which Apply, or Does Not Apply

- [A]  Working, Royalty or Overriding Royalty Interest Owners
- [B]  Offset Operators, Leaseholders or Surface Owner
- [C]  Application is One Which Requires Published Legal Notice
- [D]  Notification and/or Concurrent Approval by BLM or SLO  
U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office
- [E]  For all of the above, Proof of Notification or Publication is Attached, and/or,
- [F]  Waivers are Attached

[3] **SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED ABOVE.**

[4] **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is **accurate** and **complete** to the best of my knowledge. I also understand that **no action** will be taken on this application until the required information and notifications are submitted to the Division.

Note: Statement must be completed by an individual with managerial and/or supervisory capacity.

Miriam Morales  
 Print or Type Name

Miriam Morales  
 Signature

Production Analyst  
 Title

4/24/12  
 Date

mmorales@yatespetroleum.com  
 e-mail Address

PC-1244



**1220 S. St Francis Dr.  
Santa Fe, NM 87505**

District III

1000 Rio Brazos Rd., Aztec, NM 87410  
Phone:(505) 334-6178 Fax:(505) 334-6170

District IV

1220 S. St Francis Dr., Santa Fe, NM 87505  
Phone:(505) 476-3470 Fax:(505) 476-3462

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

1. API Number 30-015-34552	2. Pool Code 96403	3. Pool Name WILDCAT; BONE SPRING
4. Property Code 35384	5. Property Name DOC BHU STATE	6. Well No. 001
7. OGRID No. 25575	8. Operator Name YATES PETROLEUM CORPORATION	9. Elevation 3223

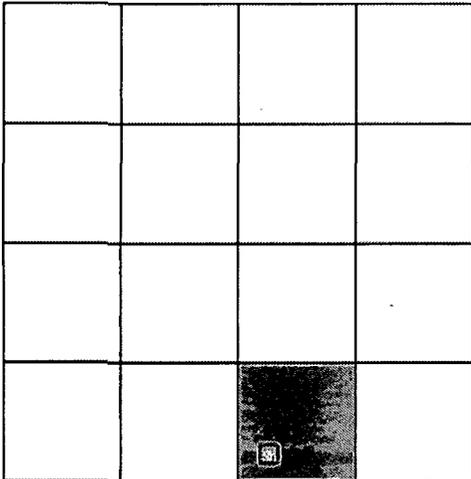
**10. Surface Location**

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
O	5	25S	30E		330	S	2310	E	EDDY

**11. Bottom Hole Location If Different From Surface**

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
12. Dedicated Acres 40.00		13. Joint or Infill		14. Consolidation Code			15. Order No.		

**NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION**

	<b>OPERATOR CERTIFICATION</b>	
	<p><i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location(s) or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</i></p>	
	<p>E-Signed By: Debbie Caffall Title: Regulatory Agent Date: 1/18/2006</p>	
	<b>SURVEYOR CERTIFICATION</b>	
<p><i>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</i></p>		
<p>Surveyed By: Herschel Jones Date of Survey: 11/3/2005 Certificate Number: 3640</p>		

DISTRICT I  
1625 N. French Dr., Hobbs, NM 88240  
Phone (575) 293-0161 Fax: (575) 293-0720

DISTRICT II  
1301 W. Grand Avenue, Artesia, NM 88210  
Phone (575) 748-1283 Fax: (575) 748-9723

DISTRICT III  
1000 Rio Brazos Rd., Artec, NM 87410  
Phone (505) 334-6176 Fax: (505) 334-6170

DISTRICT IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505  
Phone (505) 476-3460 Fax: (505) 476-3462

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-102  
Revised August 1, 2011

Submit one copy to appropriate  
District Office

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, New Mexico 87505

WELL LOCATION AND ACREAGE DEDICATION PLAT

AMENDED REPORT

API Number <b>30-015-3979A</b>	Pool Code <b>96473</b>	Pool Name <b>Pierce Crossing, Bone Spring, East</b>
Property Code	Property Name <b>DOC "BHU" STATE COM</b>	Well Number <b>5H</b>
OGRID No. <b>025575</b>	Operator Name <b>YATES PETROLEUM CORP.</b>	Elevation <b>3189'</b>

Surface Location

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
0	6	25 S	30 E		430	SOUTH	2310	EAST	EDDY

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
0	5	25 S	29 E		430	SOUTH	2310	EAST	EDDY

Dedicated Acres	Joint or Infill	Consolidation Code	Order No.

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED  
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

	<p><b>OPERATOR CERTIFICATION</b></p> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</p> <p>Signature _____ Date _____</p> <p>Printed Name _____</p> <p>Email Address _____</p>
	<p><b>SURVEYOR CERTIFICATION</b></p> <p>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</p> <p>NOVEMBER 12 2011 Date Surveyed</p> <p>Signature &amp; Seal of Professional Surveyor </p> <p>Certificate No. Gary L. Jones 7977</p>
<p><b>SURFACE LOCATION</b></p> <p>Lat - N 32°09'11.62" Long - W 103°55'10.42" NMSPC- N 419725.829 E 669388.905 (NAD-83)</p>	<p><b>PROPOSED BOTTOM HOLE LOCATION</b></p> <p>Lat - N 32°09'12.43" Long - W 103°54'00.42" NMSPC- N 419830.976 E 675406.245 (NAD-83)</p>
<p>BASIN SURVEYS 25594</p>	

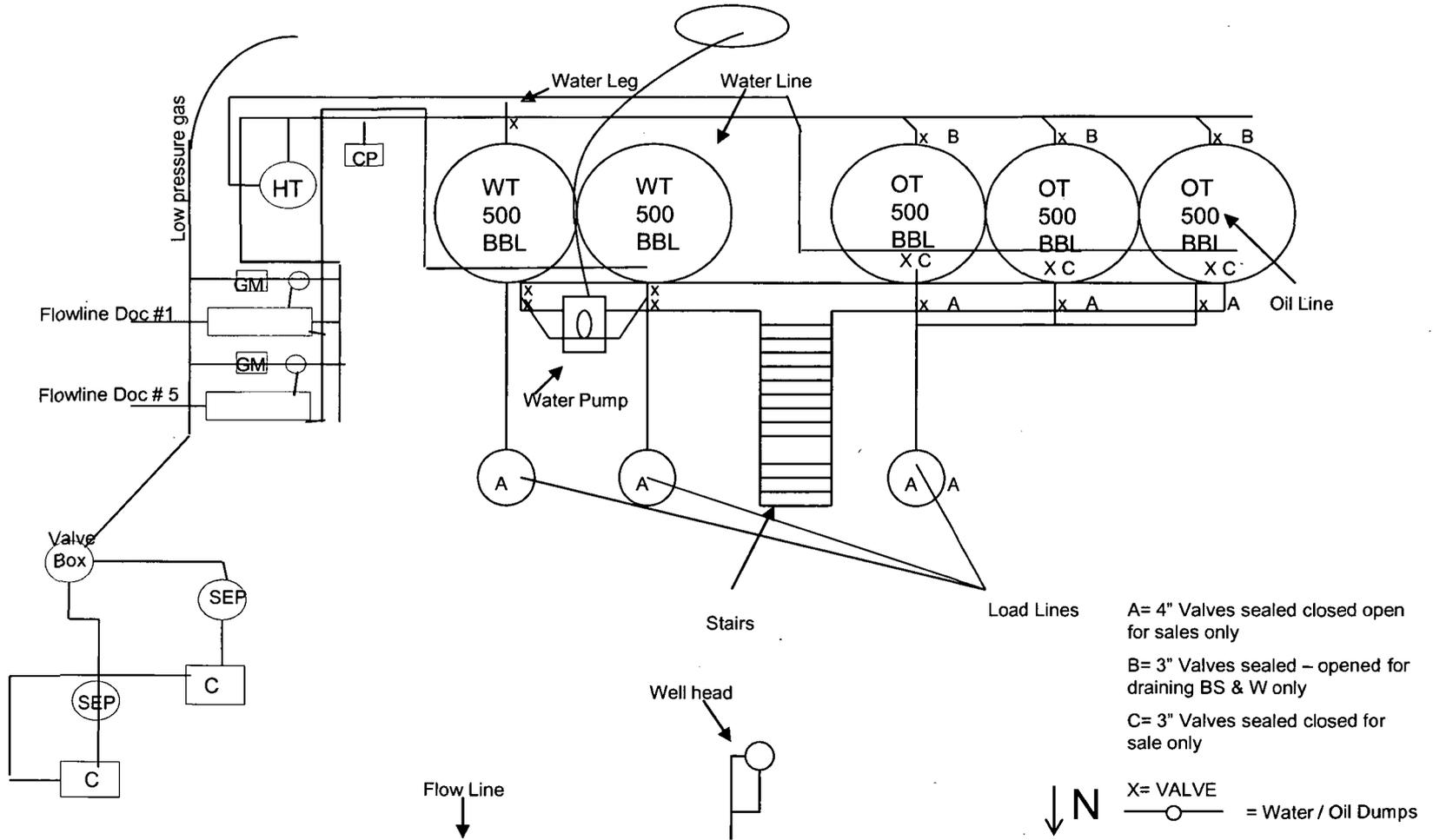


# DOC BHU BATTERY #1

330' FSL & 2310' FEL \* 05-25S-30E \* 1\* EDDY County, NM

105 South 4<sup>th</sup> Street \* Artesia, NM 88210  
(505)-748-1471

-Joe Palma  
March 2012



To whom it may concern:

The ownership of the following wells and associated pools are identical in working, royalty, and overriding royalty interest and percentages.

Well Name: Doc BHU State #1  
Formation: Corral Canyon/Delaware  
Pierce Crossing/Bone Springs

Well Name: Doc BHU State Com #5H  
Formation: Pierce Crossings/Bone Springs

I certified that this information is true to the best of my knowledge.

Signed



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Landman



YATES BUILDING - 105 SOUTH FOURTH ST.  
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

**CERTIFIED MAIL**

7010 2780 0002 8287 9478

7010 2780 0002 8287 9478

PS Form 3800, August 2005 See Reverse for Instructions

Sent to: NM, SLO Comm. of Public Lands  
Street, Apt. No.: P.O. Box 1148  
or PO Box No.:  
City, State, ZIP+4: Santa Fe NM 87504

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here  
*Phoenix AZ*

**DOMESTIC MAIL RECEIPT**  
For delivery information visit our website at www.usps.com  
U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only) No Insurance Coverage Provided

New Mexico State Land Office  
Commissioner of Public Lands  
Santa Fe Trail  
1148  
New Mexico 87504-1148

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

New Mexico State Land Office  
Commissioner of Public Lands  
310 Old Santa Fe Trail  
P.O. Box 1148  
Santa Fe, New Mexico 87504-1148

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
**X**  Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number (Transfer from sender) 7010 2780 0002 8287 9478