PlA'd. OKTOBELEASE. YWB. 6/1/2009

| Submit One Copy To Appropriate District Office | State of New Mex | | | Form C-103 |
|--|--------------------------|--------------------------------|--|-----------------|
| Energy, Minerals and Natural Resources 1625 N French Dr., Hobbs, NM 882 RECEIVED District II | | WELL API NO. / 30-025-37096 | March 18, 2009 | |
| 1301 W. Grand Avg. Artoga. NM 88210 OIL CONSERVATION DIVISION | | | 5. Indicate Type of Lease | |
| District III MAY 29 2009220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410 | | | STATE X FEE | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S St. Francis Dr., Santa Fe, NM 87505 Santa Fe, NM 87505 | | | 6. State Oil & Gas Lease No. V-5910 | |
| SUNDRY NOTICES AND REPORTS ON WELLS | | | 7. Lease Name or Unit | Agreement Name |
| (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 PROPOSALS) | | | Chesney State Unit | |
| 1. Type of Well: Oil Well Gas Well X Other PA | | | 8. Well Number #1 | |
| 2. Name of Operator | | | 9. OGRID Number | |
| Yates Petroleum Corporation | | | 025575 | · . |
| 3. Address of Operator 105 S. 4 th Street, Artesia, NM 88210 | | | 10. Pool name or Wıldcat Dempster Mill Mississippian | |
| 4. Well Location | | | | |
| Unit Letter_E_:_1650feet from the _1 | North line and 990 | _feet from the W | est_line / | |
| Section 26 Township 11S Range 35E NMPM Lea County | | | | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | | | | |
| 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 DRIL | | | | D A 🔲 |
| PULL OR ALTER CASING MULTIPLE | COMPL | CASING/CEMENT | JOB 📙 | |
| OTHER: Discretion is ready for OCD inspection after P&A | | | | |
| All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned. | | | | |
| A steel marker at least 4" in diameter and at least 4" above ground level has been set in concrete. It shows the | | | | |
| | | | | |
| OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR | | | | |
| PERMANENTLY STAMPED ON THE MARKER'S SURFACE. | | | | |
| The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and | | | | |
| other production equipment. | | | | |
| Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level. | | | | |
| If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with | | | | |
| OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed from lease and well location. | | | | |
| All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have | | | | |
| to, be removed.) | | | | |
| All other environmental concerns have been addressed as per OCD rules. Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non- | | | | |
| retrieved flow lines and pipelines. | a in accordance with 19 | .13.33.10 WMAC. | An nuids have been tem | oved from non- |
| Wilson all annuals has been as well-to-d suctions 41:5 Co. | 4. 41 | | 1.1 | |
| When all work has been completed, return this for | in to the appropriate Di | strict office to sche | edule an inspection. | |
| SIGNATURE Hear Jagus | TITLE | encesso fe | DEEMAN DATE | 5/28/2009 |
| TYPE OR PRINT NAME YERAIN JUR | レモス E-MAIL: | | DATE PHONI | :: 575-748-/47. |
| FOI STATE USE VIIIV 1 - 7 | | | | |
| APPROVED BY: Maley HSrown TITLE Compliance Office DATE 6/1/2009 | | | | |
| Conditions of Approval (if arry): | | ı | α | |