Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103 October 13, 2009
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	WELL API NO.
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-015-37941
District III	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE □ FEE □
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505	STATE FEE 6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM	•	o. State on a das Bease No.
87505 SUNDRY NOTI	CES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOS	SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	Lechuza BQC State
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		8. Well Number
1. Type of Well: Oil Well	Gas Well Other	1
2. Name of Operator		9. OGRID Number
Yates Petroleum Corporation 3. Address of Operator		025575 10. Pool name or Wildcat
105 South Fourth Street, Artesia, N	M 88210	Wildcat; Bone Spring
4. Well Location		Thous, Done Spring
Unit Letter A : 535 feet from the North line and 330 feet from the East line		
Section 36 Township 26S Range 28E NMPM Eddy County		
	11. Elevation (Show whether DR, RKB, RT, GR,	etc.)
Maria Artista Artificia	2950'GR	<u> </u>
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO:		
		SUBSEQUENT REPORT OF: VORK
TEMPORARILY ABANDON		DRILLING OPNS. PAND A
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEN	
DOWNHOLE COMMINGLE		
OTHER:	☐ OTHER: Spi	ud 🖂
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.		
6/30/10 – Spudded well at 2:30 PM. TD 10'. Hole size 12-1/4".		
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		····
Spud Date: 6/30/10	Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE (TITLE Regulatory Compli	ance Supervisor DATE July 2, 2010
Type or print name Tina Hue	rta E-mail address: tinah@yatespetro	oleum.com PHONE: <u>575-748-4168</u>
For State Use Only		
APPROVED BY:	TITLE	DATE
Conditions of Approval (if any):		