| Submit 1 Copy To Appropriate District S | ate of New Mexico | Form C-103 | | | | |
|---|---|--|--|--|--|--|
| Office District I – (575) 393-6161 Energy, M | nerals and Natural Resources/_ | Revised July 18, 2013 | | | | |
| | WELL API NO. | | | | | |
| 1625 N. French Dr., Hobbs, NM 882405 OCD District II – (575) 748-1283 | SERVATION DIVISION 30-025-40517 | | | | | |
| 611 5. Flist St., Altesia, NVI 66210 | 5 Indicate Lype of L | 5. Indicate Type of Lease STATE FEE 6. State Oil & Gas Lease No. | | | | |
| 1000 Bio Prozos Rd Arten NN Edg MOL & Government | South St. Francis Dr. STATE | | | | | |
| $\frac{\text{District IV}}{\text{District IV}} = (505) 476-3460 \text{S}$ | Inta Fe, NM 87505 6. State Oil & Gas L | | | | | |
| 1220 S. St. Francis Dr., Santa Fe, NM | VO-8090 | | | | | |
| 87505 RECEIVED | | | | | | |
| SUNDRY NOTICES AND REPO | | 7. Lease Name or Unit Agreement Name | | | | |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OF | intuinge billit sta | Mango BRM State | | | | |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERM PROPOSALS.) | 8. Well Number | | | | | |
| | ther 1H | | | | | |
| 2. Name of Operator | 9. OGRID Number | | | | | |
| Yates Petroleum Corporation | 025575 | • | | | | |
| 3. Address of Operator | 10. Pool name or Wi | Idcat | | | | |
| 105 South Fourth Street, Artesia, NM 88210 | | Featherstone; Bone Spring | | | | |
| | | | | | | |
| 4. Well Location | | | | | | |
| Unit Letter <u>C</u> : <u>100</u> feet from | | | | | | |
| Unit Letter <u>N</u> <u>330</u> feet from | the <u>South</u> line and <u>2310</u> feet from the | e <u>West</u> line | | | | |
| Section 27 Townshi | 20S Range 35E NMPM Lea | County 🗸 | | | | |
| 11. Elevation (| how whether DR, RKB, RT, GR, etc.) | | | | | |
| | 3682'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 | | REMEDIA | L WORK | | ALTERING CA | .sing 🔲 |
| TEMPORARILY ABANDON | CHANGE PLANS | | COMMEN | CE DRILLING | OPNS. | P AND A | |
| PULL OR ALTER CASING | MULTIPLE COMPL | | CASING/C | EMENT JOB | | | |
| DOWNHOLE COMMINGLE | | | | | | | |
| CLOSED-LOOP SYSTEM | | | | | | | |
| OTHER: | | | OTHER: | 5' new hole | | | \boxtimes |
| 13. Describe proposed or comp | leted operations. (Clearly | state all 1 | pertinent det | ails, and give p | ertinent dat | es, including est | imated date |

 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.

9/9/13 - Made 5' new hole. TD 105'. Hole size 12-1/4". Notified E.L. Gonzales NMOCD-Hobbs of operations via email.

| Spud Date: | 8/31/12 | Rig Release I | Date: | | |
|--|---------------------------------------|---------------------|---|---|---|
| I hereby certif | fy that the information above is true | and complete to the | best of my knowledge and belief | f. | |
| SIGNATURE Type or print. For State Use | name Laura Watts | | gulatory Reporting Technician laura@yatespetroleum.com | _ DATESeptember 11, 2 PHONE:575-748-42 | |
| APPROVED Conditions of | BY: Accepted for Record | Only TITLE | | DATE | |
| | | | S | SEP 17 2013 | Γ |