Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
<u>District I</u> - (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	Revised August 1, 2011 WELL API NO.
<u>District II</u> – (575) 748-1283 811 S. First St , Artesia, NM 88210	OIL CONSERVATION DIVISION	30-015-39147
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	5. Indicate Type of Lease  STATE  FEE
<u>District IV</u> – (505) 476-3460 1220 S St Francis Dr , Santa Fe, NM 87505	Santa Fe, NM 87505	6. State Oil & Gas Lease No. VO-0228
SUNDRY NOT (DO NOT USE THIS FORM FOR PROPE	CICES AND REPORTS ON WELLS OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ICATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name Gopher BRG State
PROPOSALS.)  1. Type of Well: Oil Well	Gas Well Other	8. Well Number
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,	NM 88210	Empire; Glorieta-Yeso
4. Well Location Unit Letter L :	1850 feet from the South line and	330 feet from the West line
Section 13	Township 17S Range 28E 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	NMPM Eddy County
3643'GR		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF II PERFORM REMEDIAL WORK  TEMPORARILY ABANDON  PULL OR ALTER CASING  DOWNHOLE COMMINGLE	PLUG AND ABANDON	RILLING OPNS. P AND A
OTHER:		57
OTHER: Spud   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.		
7/5/12 – Spudded well at 4:00 PM. Set 40' of 20" conductor and cemented with 15 sx redi-mix to surface. Notified Randy Dade NMOCD-Artesia of operations via email.		
		RECEIVED
		JUL 12 2012
		NMOCD ARTESIA
		MINOGO ANTEGIA
Spud Date: 7/5/12	Rig Release Date:	
<u> </u>		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE TITLE Regulatory Reporting Supervisor DATE July 9, 2012		
Type or print name Tina Huerta E-mail address:		
APPROVED BY:	adl TITLE DIST AS	ows 2 DATE 7/12/10
Conditions of Approval (if any):	IIILE OWN COMP	OWO DATE 1/12/12