Submit I Copy To Appropriate District Office	State of New Mexico	Form C-103
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	October 13, 2009 WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-015-37464
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	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		
	FICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
1 `	OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ICATION FOR PERMIT" (FORM C-101) FOR SUCH	Puppy BPP State Com
PROPOSALS.)		8. Well Number
1. Type of Well: Oil Well 2. Name of Operator	Gas Well Other	9. OGRID Number
Yates Petroleum Corporation		025575
3. Address of Operator	NIM 00010	10. Pool name or Wildcat
105 South Fourth Street, Artesia, NM 88210 Empire; Wolfcamp, Northwest 4. Well Location		
4. Well Location Surface Lot 4:	360 feet from the North line and	200 feet from the West line
BHL Lot 1 :	960 feet from the North line and	330 feet from the East line
Section 2	Township 17S Range 27E	NMPM Eddy County
	11. Elevation (Show whether DR, RKB, RT, GR, etc.,)
	3425°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 REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PAND A		
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEMEN	_
DOWNHOLE COMMINGLE		_
OTHER:	OTHER: 5' new h	⊠ .
	pleted operations. (Clearly state all pertinent details, an	
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of		
proposed completion or recompletion.		
10/6/10 – Made 5' new hole at 1:15 PM. TD 85'. Hole size 12-1/4".		
		NECEIVED
		OCT 12 2010
		ADTECIA
		NMOCD ARTESIA
Smud Date: 12/31/0)Q	
Spud Date:	Rig Release Date:	
I hereby certify that the information	n above is true and complete to the best of my knowledg	e and belief.
	1	
SIGNATURE Wina 4	TITLE Decider Compliance Co	manuisan DATE Ostobar 7 2010
SIGNATURE Cina Lucia TITLE Regulatory Compliance Supervisor DATE October 7, 2010		
Type or print name Tina Hu	erta E-mail address: tinah@yatespetroleur	m.com PHONE: <u>575-748-4168</u>
For State Use Only	0.4. 0.	
Accepted for record	upld illruggittle	DATE 10-12-10
Condition M Qual (if any):	O	