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.
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-015-37932  5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
SUNDRY NOTI (DO NOT USE THIS FORM FOR PROPOS	CES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name Herradura Unit 8. Well Number
1. Type of Well: Oil Well 🗵	Gas Well 🗵 Other	1H
2. Name of Operator Yates Petroleum Corporation		9. OGRID Number 025575
3. Address of Operator 105 South Fourth Street, Artesia, NM 88210		10. Pool name or Wildcat San Lorenzo; Bone Spring
4. Well Location		San Edicizo, Bone Spring
Unit Letter A:	330 feet from the North line and	760 feet from the East line
Section 16	Township 24S Range 25E	NMPM Eddy County
	11. Elevation (Show whether DR, RKB, RT, GR, 4130'GR	etc.)
		'
12. Check A	appropriate Box to Indicate Nature of Noti	ce, Report or Other Data
NOTICE OF IN		UBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK  TEMPORARILY ABANDON	PLUG AND ABANDON   REMEDIAL W CHANGE PLANS   COMMENCE	/ORK ☐ ALTERING CASING ☐ DRILLING OPNS.☐ P AND A ☐
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEM	<del>_</del>
DOWNHOLE COMMINGLE		<del>-</del>
OTHER:	OTHER: 5'n	ew hole
	rk). SEE RULE 19.15.7.14 NMAC. For Multiple	, and give pertinent dates, including estimated date Completions: Attach wellbore diagram of
0/20/10 Mode 52 below 4 1.00 1	ONA TED 262 - Halla view 12 1/42	,
9/20/10 – Made 5' new hole at 1:00 l	7M. 110 25°, Hole size 12-1/4°.	
4		
		1
		;
		:
Spud Date:	Rig Release Date:	
I hereby certify that the information a	above is true and complete to the best of my knowl	edge and belief.
11-11	<u>}</u>	
SIGNATURE ( )	TITLE Regulatory Compliance	Supervisor DATE September 22, 2010
Type or print name Tina Fluer For State Use Only	rta E-mail address: tinah@yatcspctro	leum.com PHONE: 575-748-4168
APPACCEPTED for record	מ וידון	DATE 12-3-10
Conditions of Approval (if any):	11165	DATE 16 2 10

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