Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-10 October 13, 20
<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	30-015-37554
District III	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa 1 C, 14141 07 303	6. State Oil & Gas Lease No.
SUNDRY NOT (DO NOT USE THIS FORM FOR PROPE	CICES AND REPORTS ON WELLS DSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name Brittany BPA State Com
PROPOSALS.)	ICATION FOR PERMIT" (FORM C-101) FOR SUCH	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		10. Pool name or Wildcat
105 South Fourth Street, Artesia, I	NM 88210	Bone Spring
4. Well Location Unit Letter B:	660 feet from the North line and	1650 feet from the East line
		<del></del>
Section 16	Township 26S Range 25E 11. Elevation (Show whether DR, RKB, RT, GR, et	NMPM Eddy County
	3722'GR	ı. <i>)</i>
12. Check	Appropriate Box to Indicate Nature of Notice	e, Report or Other Data
NOTICE OF IN	NTENTION TO: SU	DSECHENT DEDODT OF:
PERFORM REMEDIAL WORK		BSEQUENT REPORT OF: ork
TEMPORARILY ABANDON	<del></del>	RILLING OPNS. P AND A
PULL OR ALTER CASING	<del></del>	<del>-</del>
DOWNHOLE COMMINGLE	·	N 30B
_		
OTHER:	OTHER: 5' nev	
	pleted operations. (Clearly state all pertinent details, a vork). SEE RULE 19.15.7.14 NMAC. For Multiple C	
proposed completion or re		ompletions. Attach wendore diagram of
1/0/10 1/1 1/20	DD 4 TD 051 VI 1 1 10 1/49	
1/8/10 – Made 5' new hole at 1:30	PM. TD 85'. Hole size 12-1/4".	
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2/1/16		NMOCD ARTESIA
Spud Date: 2/1/10	Rig Release Date:	NMOCD ARTESIA
Spud Date: 2/1/10	Rig Release Date:	NMOCD ARTESIA
spud Date:	Rig Release Date:	
spud Date:	Rig Release Date:	
spud Date:	Rig Release Date:	
hereby certify that the information	n above is true and complete to the best of my knowled	
hereby certify that the information	TITLE Regulatory Compliance	lge and belief.  Supervisor DATE November 9, 2010
hereby certify that the information  SIGNATURE   Type or print name   Tina Hu	n above is true and complete to the best of my knowled	lge and belief.  Supervisor DATE November 9, 2010
hereby certify that the information  SIGNATURE Type or print name Tina Hu  For State Use Only	TITLE Regulatory Compliance  E-mail address: tinah@yatespetrole	dge and belief.  Supervisor DATE November 9, 2010  um.com PHONE: 575-748-4168
hereby certify that the information  SIGNATURE	TITLE Regulatory Compliance	lge and belief.  Supervisor DATE November 9, 2010