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	30-015-38245 5. Indicate Type of Lease
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE S FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87505	6. State Oil & Gas Lease No. VO-7605
SUNDRY NO (DO NOT USE THIS FORM FOR PROP	FICES AND REPORTS ON WELLS OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A JICATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name Grapevine Draw BQV State
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well Other	8. Well Number
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 Wildcat
4. Well Location		
Unit Letter F: Section 36	330 feet from the South line and Township 26S Range 23E	2310 feet from the West line NMPM Eddy County
Section 36 Township 26S Range 23E NMPM Eddy County 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4074'GR		
40/4 UK		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING COMMENCE DRILLING OPNS. P AND A DOWNHOLE COMMINGLE CASING/CEMENT JOB CASING/		
OTHER:	_	
OTHER: 5' new hole 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.		
12/6/10 – Made 5' new hole at 3:2:	5 PM. TD 20'. Hole size 12-1/4''.	
Tayo, To Trade 5 How Note at 5.2.		RECEIVED DEC 1 0 2010 NMOCD ARTESIA
Spud Date: 10/29/	Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE TITLE Regulatory Compliance Supervisor DATE December 9, 2010		
Type or print name Tina He For State Use Only	erta E-mail address: tinah@yatespetroleu	m.com PHONE: <u>575-748-4168</u>
APPROVED ACCEPTED for I	TITLE	DATE 12-16-10
Conditions of Approval Man (1)		non