| Submit 1 Copy To Appropriate District Office   | State of New Mexico   | Form C-103                                    |
|--|---|---|
| <u>District I</u> – (575) 393-6161<br>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  | OIL CONSERVATION DIVISION   | 30-015-38419                                  |
| 811 S. First St., Artesia, NM 88210<br><u>District III</u> – (505) 334-6178  | 1220 South St. Francis Dr.  | 5. Indicate Type of Lease STATE  FEE          |
| 1000 Rio Brazos Rd., Aztec, NM 87410<br><u>District IV</u> – (505) 476-3460  | Santa Fe, NM 87505  | 6. State Oil & Gas Lease No.                  |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>87505   |   | VO-7679                                       |
|  | TICES AND REPORTS ON WELLS OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A  | 7. Lease Name or Unit Agreement Name          |
| DIFFERENT RESERVOIR. USE "APPI   | LICATION FOR PERMIT" (FORM C-101) FOR SUCH  | Coltrane BQR State Com  8. Well Number        |
| PROPOSALS.)  1. Type of Well: Oil Well   | Gas Well  Other   | 1H  |
| 2. Name of Operator  | - Out // | 9. OGRID Number                               |
| Yates Petroleum Corporation  |   | 025575  |
| 3. Address of Operator 105 South Fourth Street, Artesia,   | NM 88210  | 10. Pool name or Wildcat Wildcat; Bone Spring |
| 4. Well Location   | 1441 60210  | wheelt, Bone Spring                           |
| Unit Letter P :  | 430 feet from the South line and  | 660 feet from the East line                   |
| Unit Letter M  | 660 feet from the South line and  | feet from the West line                       |
| Section 36   | Township 25S Range 31E  | NMPM Eddy County                              |
| and the second s | 11. Elevation (Show whether DR, RKB, RT, GR, et 3299'GR   | c.)   |
|  | 3299 GR   |   |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   |   |   |
| NOTICE OF I  | NTENTION TO: SU   | BSEQUENT REPORT OF:                           |
| PERFORM REMEDIAL WORK  |   | <u> </u>                                      |
| TEMPORARILY ABANDON  | <del></del>   | RILLING OPNS. P AND A                         |
| PULL OR ALTER CASING   |   | NT JOB  |
| DOWNHOLE COMMINGLE   | J   |   |
| OTHER:   | OTHER: 5' new   |   |
| 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   |   |   |
| of starting any proposed very proposed completion or re-   |   | ompletions: Attach wellbore diagram of        |
|  |   |   |
| 8/3/13 – Made 5' new hole. TD 250'. Hole size 10". Notified Randy Dade NMOCD-Artesia of operations via email.  |   |   |
|  |   |   |
| www.emnra.sta  |   |   |
| Current forms are av website and should l  |   |   |
| filing regulatory d  |   |   |
| ming regulatory a  |   |   |
|  |   | RECEIVED                                      |
|  |   | 4UG 07 2013                                   |
| Spud Date: 1/31/   | Rig Release Date:   | <u> </u>                                      |
| Spud Date.   | Nig Release Bate.   | NMCCD ARTESIA                                 |
|  |   |   |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief.   |   |   |
| $\mathcal{L}$  |   |   |
| SIGNATURE JUNG   | TITLE Regulatory Reporting Tec  | chnician DATE <u>August 3, 2013</u>           |
| Type or print name Laura V   | Watts E-mail address: laura@yatespetroleum  | n.com PHONE:575-748-4272                      |
| For State Use Only   | tor record  |   |
|  | TITLE   | DATE 8/7/2013                                 |
| APPROVED BY: Conditions of Approval (if any):  | IIILE   | DATE OF TOOLS                                 |