Submit 1 Copy To Appropriate District Office	$\begin{array}{ll} \hline French Dr., Hobbs, NM 88240\\ \hline II - (575) 748-1283\\ \hline III - (505) 334-6178\\ \hline D Brazos Rd., Aztec, NM 87410\\ \hline IV - (505) 476-3460\end{array}$ Energy, Minerals and Natural Resources OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505		Form C-103
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240			Revised August 1, 2011 WELL API NO.
District II – (575) 748-1283 811 S. First St., Artesia, NM 88210			30-015-27047 5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410			STATE FEE 6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			7. Lease Name or Unit Agreement Name NDDUP Unit
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other			8. Well Number 6
2. Name of Operator		9. OGRID Number	
Yates Petroleum Corporation 3. Address of Operator			025575 10. Pool name or Wildcat
105 South Fourth Street, Artesia, NM 88210			N. Seven Rivers; Glorieta-Yeso
4. Well Location Unit Letter B :	660 feet from the North	line and	1980 feet from the East line
Section 17	Township 19S Rat		NMPM Eddy County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3538'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. P AND A			
PULL OR ALTER CASING		CASING/CEMEN	
<u> </u>	_		
OTHER: OTHER: Name Change			
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.			
Former Wellname: NDDUP Unit #	ŧ6		
New Wellname: Julie #2			
Effective 9/13		ļŀ	RECEIVED
SEP 13 2013			
NMOCD ARTESIA			
		1410	IOCH ARTESIA
Spud Date:	Rig Release Da	te:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
Thereby certify that the information above is the and complete to the best of my knowledge and benef.			
SIGNATURE			
Type or print name <u>Tina Hu</u> For State Use Only	erta E-mail address: <u>tir</u>	nah@yatespetroleu	um.com PHONE: <u>575-748-4168</u>
APPROVED BY: A COL TITLE DIST H Superior DATE 4/16/2013 Conditions of Approval (if any):			