Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103/W October 13, 2009
District I 1625 N. French Dr , Hobbs, NM 88240	Energy, Minerals and Natural Resources		WELL API NO.
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-015-37495 5. Indicate Type of Lease
District III 1000 Rio Brazos Rd , Aztec, NM 87410	1220 South St. Francis Dr.		STATE STATE FEE
District IV	Santa Fe, NM 87505		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" (FOR TOPPER PROPOSALS)			7. Lease Name or Unit Agreement Name
			Torpedo BOW State Com 8. Well Number
PROPOSALS) 1. Type of Well: Oil Well	Gas Well Othe		1H
2. Name of Operator		MAR 1 0 2010	9. OGRID Number
Yates Petroleum Corporation 3. Address of Operator		NINACOD ADTECLA	025575 10. Pool name or Wildcat
105 South Fourth Street, Artesia, I	NM 88210	NMOCD ARTESIA	Wildcat
4. Well Location			
Unit Letter P	660 feet from the	South line and	330 feet from the West line
Section 11 Township 25S Range 27E NMPM Eddy County			
the same greater extension of the	11. Elevation (Show wh	nether DR, RKB, RT, GR, etc. 3170'GR	
		3170 GK	
12. Check	Appropriate Box to In	dicate Nature of Notice,	Report or Other Data
NOTICE OF INTENTION TO: SÜBSEQÜENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING			
TEMPORARILY ABANDON			
PULL OR ALTER CASING			
DOWNHOLE COMMINGLE			and the second of the second o
OTHER:		OTHER: Spud	
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.			
2/26/10 – Spudded well at 12:00 Noon. Made 10' of new 12-1/4" hole.			
S1 Detail 2/26/10		. [
Spud Date: 2/20/10	Rig F	Release Date:	
			,
I hereby certify that the information	above is true and complet	e to the best of my knowledge	re and helief
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
CICNATURE (A.)			
SIGNATURE (C)	TITI	LE <u>Regulatory Compliance</u>	e Supervisor DATE March 8, 2010
Type or print nameTina Hu	erta E-mail add	lress: <u>tinah@yatespetroleur</u>	m.com PHONE: <u>575-748-4168</u>
For State Use Only			
APPROVED BY: 1) and that title Field Superisor Date 3-15-2010			
Conditions of Approval (if any):			
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