Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103	
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources		ELL API NO.	evised August 1, 201
District II – (575) 748-1283 811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505 SUNDRY NOTRES 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			30-025-40513	
			5. Indicate Type of Lease	
			STATE FEE 6. State Oil & Gas Lease No.	
			VB-1193	
			7. Lease Name or Unit Agreement Name Adder BSE State	
PROPOSALS) 1. Type of Well: Oil Well Gas Well Other			Well Number	
Name of Operator Yates Petroleum Corporation			9. OGRID Number 025575	
3. Address of Operator			10. Pool name or Wildcat Wildcat; Bone Spring	
105 South Fourth Street, Artesia, NM 88210 4. Well Location			deat; Bone Spring	_
Unit Letter B:	feet from the North feet from the South			East line
Section 31	Township 24S Ran	nge 33E NM	 IPM Lea	County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
	3547	GK		
12. Check Ap	propriate Box to Indicate Nat	ture of Notice, Repor	rt or Other Data	
NOTICE OF IN	FENTION TO:	SUBSEC	QUENT REPOR	T OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK				ERING CASING 🔲
TEMPORARILY ABANDON				ID A ⊔
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MOLTIPLE COMPL	CASING/CEMENT JOE	3 <u> </u>	
OTHER: 13 Describe proposed or complete	eted operations. (Clearly state all p	OTHER: Spud	e nertinent dates inc	luding estimated
	d work). SEE RULE 19.15.7.14 N			
C/20/12 - C11-1111 10:00 AM	TD 102 H-1: 10 1/422 N-43	G. IEI Committee ND 40	OCD HALL A	VI
6/28/12 – Spudded well at 10:00 AM	. 1D 10'. Hole size 12-1/4". Noti	fied E.L. Gonzales NMC	OCD-Hobbs of opera	itions via email.
Spud Date: 6/28/12	Rig Release Da	te·		
Spud Bute.	Trig Release Da			
	_	_		
I hereby certify that the information a	bove is true and complete to the be	est of my knowledge and	belief.	•
SIGNATURE CANALLY	TITLE Regulate	ory Reporting Supervisor	DATE July 5,	<u>2012</u>
	ta E-mail address: tir	ah@yatespetroleum.com	<u>n</u> PHONE: <u>5</u>	75-748-4168
For State Use Only Acc	antod e			
APPROVED BY:	epted for Record Only		DATE	
Conditions of Approval (if any):	MAR 7/10/201			