Submit 1 Copy To Appropriate District Office			Form C-103 Revised August 1, 2011 WELL API NO. 30-025-40058 5. Indicate Type of Lease STATE FEE 6. State Oil & Gas Lease No. VB-0870	
District III – (505) 334-6178 1000 Rio Brazos Rd, Aztec, NM 87410 District IV – (505) 476-3460 SFP 1220 S. St Francis Dr, Santa Fe, NM 87505				
SUNDRY NOT THE 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 PROPOSALS.)			7. Lease Name or Unit Agreement Name Orion BQO State 8. Well Number	
 Type of Well: Oil Well			9. OGRID Number	
Yates Petroleum Corporation 3. Address of Operator 105 South Fourth Street, Artesia,	NM 88210		025575 10. Pool name or Wildo Wildcat; Delaware	cat /
4. Well Location Unit Letter O:	660 feet from the South	line and 1	feet from the	East line
Section 36 Township 17S Range 35E NMPM Lea County 11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
Carlotte San	3892'	GR		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE	PLUG AND ABANDON ☐ CHANGE PLANS ☐ MULTIPLE COMPL ☐	REMEDIAL WORK COMMENCE DRII CASING/CEMENT	〈 □ ALTE LLING OPNS.□ P AN	RING CASING
OTHER:		OTHER: 5' new h		\boxtimes
 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. 9/5/12 – Made 5' new hole at 8:15 AM. TD 155'. Hole size 10". Notified E.L. Gonzales NMOCD-Hobbs of operations via email. 				
NOTE: Conductor with locking cap was set 3/17/11. According to surface waters map the estimated top of fresh water could be approximately 51-58'. At present, water has not been recorded in this wellbore.				
Spud Date: 3/1/1	Rig Release Da	ate:		
I hereby certify that the information	above is true and complete to the be	est of my knowledge	e and belief.	
SIGNATURE And the	TITLE Regulator	y Reporting Superv	isor DATE <u>Septemb</u>	per 11, 2012
Type or print name Tina Huerta E-mail address: tinah@yatespetroleum.com PHONE: PHONE: For State Use Only				
APPROVED BY:	I with Doct M	3 7	DATE 9-13-	2012
Conditions of Approval (if any):	TILL COLL OF		DAIL /	W/C