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Submit I Copy To Appropriate District State of New Mexico				Form C	2-103	
Office District I - (575) 393-6161 Energy, Minerals and Natural Resources 1625 N French Dr., Hobbs, NM 88240 District II - (575) 748-1283 811 S First St, Artesia, NM 88210 DISTRICT III - (505) 334-6178 1220 South St. Francis Dr. 1000 Rio Brages Rd, Artes, NM 87410 1220 South St. Francis Dr.				Revised August		
			WELL API NO.			
			30-025-40513 5. Indicate Type of Lease			
			STATE STATE			
District III - (505) 334-6178 1220 South St. Francis Dr. 1000 Rio Brazos Rd , Aztec, NM 87410 2 9 2012 Santa Fe, NM 87505 District IV - (505) 476-3460 0C1 2 9 2012 Santa Fe, NM 87505			6. State Oil & Gas Lease No.			
1220 S St Francis Dr, Santa Fe, NM 87505			VB-1193			
SUNDRY NEEDAND REPORTS ON WELLS			7. Lease Name or	Unit Agreement Na	ame	
(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			Adder BSE State			
PROPOSALS.)			8. Well Number			
1. Type of Well: Oil Well Gas Well Other						
2. Name of Operator Yates Petroleum Corporation			9. OGRID Number			
3. Address of Operator			10. Pool name or Wildcat			
105 South Fourth Street, Artesia, NM 88210			Wildcat; Bone Spring			
4. Well Location						
Unit Letter <u>B</u> : <u>175</u> feet from the	North		2200 feet from t		line	
Unit Letter <u>O</u> <u>358</u> feet from the	Sout		2227 feet from t	the <u>East</u>	line	
Section 31 Township		nge 33E	NMPM Lea	County		
II. Elevation (Show	v whether DR 3547	, <i>RKB, RT, GR, etc.,</i> 'GR			And Andrews	
12. Check Appropriate Box to I	Indicate Na	ture of Notice. R	eport or Other Da	ata		
	SEQUENT REP		~ □			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI				ALTERING CASIN P AND A		
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A U						
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OTHER: 13 Describe proposed or completed operations (Ch	arly state all	OTHER: Comple		es including estim		
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.						
9/13/12 – NU BOP. Tagged DV tool at 7128', drilled out and fell through at 7134'. Circulated hole clean. Tested casing to 2500 psi for 20 min, held good.						
9/16/12 – Pressure tested casing to 300 psi for 15 min, held good. Pickled down tubing with 500g Xylene and 1200g 15% HCL acid.						
Circulated hole clean with 3% KCL with oxygen scavenger and corrosion inhibitor.						
9/17/12 – Reamed through DV tool. RIH to 9840', apply 1500 psi on casing. Ran CBL to 3000'. DV tool at 7113'. TOC at 3990'. 9/18/12–10/11/12 - Pumped 5 bbls 3% KCL into formation. Perforated Bone Spring 10,256'-14,087' (360). Pumped 41,325g 15%						
HCL acid, 591,385# 100 mesh sand, 1,289,639# Jordan-Unimin 30/50 sand, 898,415# Atlas CRC-C 30/50 sand.						
10/12/12 - RIH past bottom perf and circulated clean. Well is flowing up casing, no tubing in the hole.						
Snud Data: 6/28/12			9/6/12			
Spud Date: 0/28/12 R	ig Release D	ate:	9/0/12			
		L				
I hereby certify that the information above is true and com		ant of music linear states	and haliaf			
	piete to the b	est of my knowledge	and bellel.			
SIGNATURE TITLE Regulatory Reporting Supervisor DATE October 26, 2012						
	address: <u>t</u>	inah@yatespetroleu	m.com PHONE	E: <u>575-748-4168</u>	-	
For State Use Only						
	п.е	ist nos	Z DATE	10-31-2	017	
Conditions of Approval (if any):		-, , - 07+	- 7			
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