Submit I Copy To Appropriate District Office State of New Mexico	Form C-103
Office District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 HOBBS OF Minerals and Natural Resources	Revised August 1, 201 WELL API NO.
D1 - 1 - 11 - (575) = 10 1000	30-025-40638
District II - (575) 748-1283 811 S. First St., Artesia, NM 88210 District III - (505) 334-6178 DEC 18 201220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460 Santa Fe, NM 87505	STATE FEE 6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM RECEIVED	VB-1191
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	Sable BSA State 8. Well Number
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other	1H
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	Antelope Ridge; Bone Spring, Northwest
4. Well Location	
Unit Letter M : 660 feet from the South line and	330 feet from the West line
Unit Letter N 660 feet from the South line and	2310 feet from the West line
Section 9 Township 23S Range 34E 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	NMPM Lea County
3423'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 WOR	-
	RILLING OPNS. P AND A
PULL OR ALTER CASING	NI JOB 🔲
OTHER: OTHER: 5' new 13. Describe proposed or completed operations. (Clearly state all pertinent details, and	
date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of	
proposed completion or recompletion.	
12/12/12 – Made 5' new hole at 10:30 AM. TD 50'. Hole size 12-1/4". Notified E.L. Go	onzales NMOCD-Hobbs of operations via
email.	
Spud Date: 6/28/12 Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowled	ge and belief.
SIGNATURE TITLE Regulatory Reporting Super	ervisor DATE <u>December 13, 2012</u>
Type or print name <u>Tina Huerta</u> E-mail address: <u>tinah@yatespetroleu</u>	<u>ım.com</u> PHONE: <u>575-748-4168</u>
FOR RECORD ONLY APPROVED BY:	_
THE THEE	DATE
Conditions of Approval (if any):	