Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I – (575) 393-6161 Energy, Minerals and Natural Resources		Revised August 1, 2011 WELL API NO.
1625 N. French Dr., Hobbs, NM 8824040BB <u>District II</u> – (575) 748-1283	OIL CONSERVATION DIVISION	30-025-40515
811 S. First St., Artesia, NM 88210	6 0040 1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	6 2013 1220 South St. Francis Dr. Santa Fe, NM 87505	STATE FEE
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Saina Pe, NWI 87303	6. State Oil & Gas Lease No. VB-1185
87505 REC	SIVED	
	ES AND REPORTS ON WELLS LS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name Taipan BST State
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH		8. Well Number
PROPOSALS.)  1. Type of Well: Oil Well  Gas Well  Other		1H
2. Name of Operator		9. OGRID Number
Yates Petroleum Corporation		025575
3. Address of Operator		10. Pool name or Wildcat
105 South Fourth Street, Artesia, NM 88210		Wildcat; Bone Spring
4. Well Location Unit Letter C: 175 feet from the North line and 2200 feet from the West line		
	30 feet from the South line and	2200 feet from the West line
Section 31 Township 24S Range 33E NMPM Lea County  11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
	3540'GR	
12. Check App	ropriate Box to Indicate Nature of Notice	, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING		
		ORILLING OPNS. □ P AND A □
PULL OR ALTER CASING	MULTIPLE COMPL ☐ CASING/CEMI	ENT JOB
DOWNHOLE COMMINGLE		
OTHER:	OTHER: 5' ne	ew hole
	ted operations. (Clearly state all pertinent details,	
date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of		
proposed completion or recompletion.		
2/25/13 – Made 5' new hole at 12:10 PM. TD 70'. Hole size 12-1/4". Notified E.L. Gonzales NMOCD-Hobbs of operations via		
email.		
5/20/12		
Spud Date: 6/28/12	Rig Release Date:	
L		
I hereby certify that the information at	pove is true and complete to the best of my knowledge	edge and belief.
SIGNATURE	TITLE Regulatory Reporting Su	upervisor DATE March 4, 2013
Type or print name Tina Huert	a E-mail address: <u>tinah@yatespetrol</u>	<u>eum.com</u> PHONE: <u>575-748-4168</u>
For State Use Only		
APPROVED BY: Elymphon TITLE DEST MGP DATE 3-7-2013		
Conditions of Approval (if any):		
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