Submit 1 Copy To Appropriate District Office District I = (575) 393-6161  State of New Mexico HOEnergy, Minerals and Natural Resources	Form C-103 Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240	WELL API NO.
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178  MAR QUE CONSERVATION DIVISION 1220 South St. Francis Dr.	30-025-40638 5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410  Santa Fe, NM 87505	STATE FEE 6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	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 Sable BSA State
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)  1. Type of Well: Oil Well  Gas Well  Other	8. Well Number
2. Name of Operator Yates Petroleum Corporation	9. OGRID Number / 025575
3. Address of Operator	10. Pool name or Wildcat
105 South Fourth Street, Artesia, NM 88210	Antelope Ridge; Bone Spring, Northwest
	feet from the West line
Unit Letter N 660 feet from the South line and 2 Section 9 Township 23S Range 34E	NMPM Lea County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	TOTAL ECA County
3423'GR	SELECTION OF THE PROPERTY OF T
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 WORK	C □ ALTERING CASING □
TEMPORARILY ABANDON	<del></del>
DOWNHOLE COMMINGLE	
OTHER: 5' new ho	ole 🖂
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.	
2/25/13 – Made 5' new hole at 10:20 AM. TD 70'. Hole size 12-1/4". Notified E.L. Gonzales 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 knowledge and belief.	
SIGNATURE TITLE Regulatory Reporting Supervisor DATE March 4, 2013	
For State Use Only	.com PHONE: <u>575-748-4168</u>
APPROVED BY: TITLE DIST. MIST	DATE 3-7-2013 /
Conditions of Approval (if any):	