

Submit 1 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (575) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III - (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV - (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico

Energy, Minerals and Natural Resources

Form C-103  
 Revised July 18, 2013

HOBBS OGD

APR 08 2014

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.  
 Santa Fe, NM 87505

RECEIVED

|  |  |  |  |  |  |                           |
|--|--|--|--|--|--|---------------------------|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(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.)<br>1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>   |  | WELL API NO.<br>30-025-41562   |  |  |  |                           |
| 2. Name of Operator<br>Yates Petroleum Corporation   |  | 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>  |  |  |  |                           |
| 3. Address of Operator<br>105 South Fourth Street, Artesia, NM 88210   |  | 6. State Oil & Gas Lease No.<br>VO-8421  |  |  |  |                           |
| 4. Well Location<br>Unit Letter <u>A</u> : <u>200</u> feet from the <u>North</u> line and <u>660</u> feet from the <u>East</u> line<br>Unit Letter <u>P</u> : <u>330</u> feet from the <u>South</u> line and <u>660</u> feet from the <u>East</u> line<br>Section <u>36</u> Township <u>20S</u> Range <u>33E</u> NMPM <u>Lea</u> County  |  | 7. Lease Name or Unit Agreement Name<br>Tango BTP State Com  |  |  |  |                           |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>3,690' GR  |  | 8. Well Number<br>4H   |  |  |  |                           |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data<br><table border="0"> <tr> <td colspan="2"> <b>NOTICE OF INTENTION TO:</b><br/>           PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/><br/>           TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/><br/>           PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/><br/>           DOWNHOLE COMMINGLE <input type="checkbox"/><br/>           CLOSED-LOOP SYSTEM <input type="checkbox"/><br/>           OTHER: <input type="checkbox"/> </td> <td colspan="2"> <b>SUBSEQUENT REPORT OF:</b><br/>           REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/><br/>           COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/><br/>           CASING/CEMENT JOB <input type="checkbox"/><br/>           OTHER: 5' new hole <input checked="" type="checkbox"/> </td> </tr> </table> |  | <b>NOTICE OF INTENTION TO:</b><br>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/><br>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/><br>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/><br>DOWNHOLE COMMINGLE <input type="checkbox"/><br>CLOSED-LOOP SYSTEM <input type="checkbox"/><br>OTHER: <input type="checkbox"/> |  | <b>SUBSEQUENT REPORT OF:</b><br>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/><br>COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/><br>CASING/CEMENT JOB <input type="checkbox"/><br>OTHER: 5' new hole <input checked="" type="checkbox"/> |  | 9. OGRID Number<br>025575 |
| <b>NOTICE OF INTENTION TO:</b><br>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/><br>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/><br>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/><br>DOWNHOLE COMMINGLE <input type="checkbox"/><br>CLOSED-LOOP SYSTEM <input type="checkbox"/><br>OTHER: <input type="checkbox"/>   |  | <b>SUBSEQUENT REPORT OF:</b><br>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/><br>COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/><br>CASING/CEMENT JOB <input type="checkbox"/><br>OTHER: 5' new hole <input checked="" type="checkbox"/>   |  |  |  |                           |
| 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.  |  | 10. Pool name or Wildcat<br>Wildcat; Bone Spring   |  |  |  |                           |

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

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|--|--|--|--|
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4/2/14 - Made 5' new hole. TD 30'. Hole size 20". Notified Maxey Brown NMOCD-Hobbs of operations via email.

Note: Set 30" culvert with locking device on 2/5/14.

Spud Date:  Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Laura Watts TITLE Regulatory Reporting Technician DATE April 7, 2014  
 Type or print name Laura Watts E-mail address: laura@yatespetroleum.com PHONE: 575-748-4272  
**For State Use Only**

APPROVED BY: Accepted for Record Only DATE \_\_\_\_\_  
 Conditions of Approval (if any): MWR 4/8/2014

APR 14 2014