

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

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.) 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		WELL API NO. 30-025-41743																												
2. Name of Operator Yates Petroleum Corporation		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>																												
3. Address of Operator 105 South Fourth Street, Artesia, NM 88210		6. State Oil & Gas Lease No. VB-1634																												
4. Well Location Unit Letter <u>P</u> : <u>200</u> feet from the <u>South</u> line and <u>660</u> feet from the <u>East</u> line Unit Letter <u>I</u> : <u>2310</u> feet from the <u>South</u> line and <u>660</u> feet from the <u>East</u> line Section <u>16</u> Township <u>20S</u> Range <u>35E</u> NMPM <u>Lea</u> County		7. Lease Name or Unit Agreement Name Tomato BVO State																												
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,716' GR		8. Well Number 1H																												
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data <table border="0"> <tr> <td colspan="2"><b>NOTICE OF INTENTION TO:</b></td> <td colspan="2"><b>SUBSEQUENT REPORT OF:</b></td> </tr> <tr> <td>PERFORM REMEDIAL WORK <input type="checkbox"/></td> <td>PLUG AND ABANDON <input type="checkbox"/></td> <td>REMEDIAL WORK <input type="checkbox"/></td> <td>ALTERING CASING <input type="checkbox"/></td> </tr> <tr> <td>TEMPORARILY ABANDON <input type="checkbox"/></td> <td>CHANGE PLANS <input type="checkbox"/></td> <td>COMMENCE DRILLING OPNS. <input type="checkbox"/></td> <td>P AND A <input type="checkbox"/></td> </tr> <tr> <td>PULL OR ALTER CASING <input type="checkbox"/></td> <td>MULTIPLE COMPL <input type="checkbox"/></td> <td>CASING/CEMENT JOB <input type="checkbox"/></td> <td></td> </tr> <tr> <td>DOWNHOLE COMMINGLE <input type="checkbox"/></td> <td></td> <td></td> <td></td> </tr> <tr> <td>CLOSED-LOOP SYSTEM <input type="checkbox"/></td> <td></td> <td></td> <td></td> </tr> <tr> <td>OTHER: <input type="checkbox"/></td> <td></td> <td>OTHER: 5' new hole <input checked="" type="checkbox"/></td> <td></td> </tr> </table>		<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>		PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>	TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>		DOWNHOLE COMMINGLE <input type="checkbox"/>				CLOSED-LOOP SYSTEM <input type="checkbox"/>				OTHER: <input type="checkbox"/>		OTHER: 5' new hole <input checked="" type="checkbox"/>		9. OGRID Number 025575
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10. Pool name or Wildcat Featherstone; Bone Spring																														

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
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CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		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.

7/18/14 – Made 5' new hole. TD 35'. Hole size 20".

HOBBS OCD

JUL 23 2014

RECEIVED

Note: 30" culvert with locking device was installed on 5/5/14.

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 July 22, 2014  
 Type or print name Laura Watts E-mail address: laura@yatespetroleum.com PHONE: 575-748-4272  
**For State Use Only**

APPROVED BY: M. Brown DATE 7/24/2014  
 Conditions of Approval (if any):  
 JUL 25 2014