Submit I Copy To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources OIL CONSERVATION DIVISION		Form C-103	
District I - (575) 393-6161			Revised July 18, 2013	
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283			WELL API NO. 30-025-10789	
811 S. First St., Artesia, NM 88210			5. Indicate Type of Lease	
District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE FEE	
District IV – (505) 476-3460	Santa Fe, NM 87505		6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM				
87505	ICES AND REPORTS ON WELL	c	7. Lease Name or Unit Agreement Name	
(DO NOT USE THIS FORM FOR PROPODIFFERENT RESERVOIR. USE "APPLI			E.L. Steeler	
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well Other WIW	0== 0	8. Well Number 007	
2. Name of Operator		-SEP 0 8 2014	9. OGRID Number	
	Yarbrough Oil,LP		25504	
3. Address of Operator PO Box 1769 Eunice, NM	99221 1760	RECEIVED	10. Pool name or Wildcat Langlie Mattix; 7Rvrs,Q,Gbg	
4. Well Location	1000 6 (6 4 6 4			
Unit Letter L :	1980feet from theSouth		660feet from theWest_line	
Section 17	Township 23S 11. Elevation (Show whether DI		7E NMPM Lea County	
	11. Elevation (Snow whether DI	K, KKB, K1, GK, etc.)	,	
12 Check	Appropriate Box to Indicate 1	Nature of Notice	Report or Other Data	
12. Check	appropriate Box to indicate i		report of Other Data	
		SUBS	SEQUENT REPORT OF:	
P E-PERMITTING]	REMEDIAL WORK		
TI P&A NR	P&A R	COMMENCE DRII	——————————————————————————————————————	
P INT TO P&A]	CASING/CEMENT	JOB 🗌	
D CSNG	CHG Loc_		A Min Committee Committee Committee	
C TA RBDI	MS CHART (SAD)	OTHER: Reques	•	
	pleted operations. (Clearly state all		I give pertinent dates, including estimated date	
			npletions: Attach wellbore diagram of	
proposed completion or recompletion.				
Yarbrough request TA status				
8/13/2014 32 minute pressure test 610psi no pressure drop				
Orignal pressure chart previously submitted, copy enclosed Witnessed by George Bowen with NMOCD				
Witnessed by George Bowen with	NMOCD	م سيه سيد د د د د		
	This	\nnroval of Tom	porary, 1 YEAR	
This Approval of Temporary Abandonment Funires 9/3/70/5				
Abandonment Expires 8//3/Z0/5				
	Ne) PROD. REF	bried-290 montils.	
<u></u>				
Spud Date:	Rig Release D	Pate:		
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I hereby certify that the information	above is true and complete to the l	pest of my knowledge	e and belief.	
11 1			. / .	
CIONATURE BARRET			9/1/11/	
SIGNATURE /) LLL C - /	TITLE Agen	t for Maurice Gard	ner DATE $9/4/14$	
Type or print name. Billy E. Pricha	rd -mail address: billy(nwlle net	PHONE: 432-934-7680	
For State Use Only	-man address. biny	<i>д</i> рине.нет	1110ND. 432-734-7000	
$\sim \sim $	MK. T-	A / / / / /	1/2/2011	
APPROVED BY: Maley Brown TITLE Dist. Supervisor Date 9/8/2014				
Conditions of Approval (if any):		1	<i>f.</i>	
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			SEP 1 1 2014	
			-V 17	

