

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

WELL API NO. 30-025-41655
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VB-0647
7. Lease Name or Unit Agreement Name Caravan State Unit
8. Well Number 7H
9. OGRID Number 025575
10. Pool name or Wildcat Triste Draw; Bone Spring, East

**SUNDRY NOTICES AND REPORTS ON WELLS**  
 (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 PROPOSALS.)

1. Type of Well: Oil Well  Gas Well  Other

2. Name of Operator  
Yates Petroleum Corporation

3. Address of Operator  
105 South Fourth Street, Artesia, NM 88210

4. Well Location  
 Unit Letter D : 50 feet from the North line and 420 feet from the West line  
 Unit Letter D : 230 feet from the North line and 387 feet from the West line  
 Section 33 Township 24S Range 33E NMPM Lea County  
 Section 28 Township 24S Range 33E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3,494' GR

HOBBBS OGD  
 SEP 22 2014  
 RECEIVED

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"/>
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: Completion operations <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.

7/16/14 - RIH to 7,528' and drilled DV tool out. Circulated clean. Tested casing to 5000 psi for 30 mins, good.  
 7/20/14 - Circulated hole clean down to float collar at 15,924'. Pumped 500 gallons of Xylene, 1200 gallons of 7.5% HCL acid. Displaced hole with 385 bbls of 3% KCL with CRW-132 with Corrosion Inhibitor and Oxygene Scavenger.  
 7/21/14 - Tested down 5-1/2" casing to 5,000 psi for 15 mins, good.  
 7/22/14 - Set 5-1/2" HM CIBP at 15,907'.  
 8/18/14 - Perforated Bone Spring 11,360' - 15,870' (504 holes). Acidized with 67,500 gallons 15% HCL acid, frac with a total of 4,353,289# of 20/40 and 30/50 Econoprop and RCS sand. 2-7/8" 6.40# L-80 tubing at 15,357'.

Spud Date: 5/13/14 /

Rig Release Date: 7/5/14 /

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 September 19, 2014

Type or print name Laura Watts E-mail address: laura@yatespetroleum.com PHONE: 575-748-4272

For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 09/19/14  
 Conditions of Approval (if any):

SEP 30 2014