Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283		30-025-41518
811 S. First St., Artesia, NM 88210	OIL CONSERVATION PHOSES OF D	5. Indicate Type of Lease
<u>District III</u> – (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 0 4 2014	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	MOA O T TON	VO-8394
SUNDRY NO (DO NOT USE THIS FORM FOR PROP	TICES AND REPORTS ON WELLS OSALS TO DRILL OR TO DEEPEN OR PLUG BRECEIVED LICATION FOR PERMIT" (FORM C-101) FOR SUCH Gas Well Other	7. Lease Name or Unit Agreement Name Fruit Loop BUL State 8. Well Number 1H
2. Name of Operator		9. OGRID Number
Yates Petroleum Corporation		025575
3. Address of Operator	NIM 00210	10. Pool name or Wildcat
105 South Fourth Street, Artesia,	NM 88210	Wildcat; Bone Spring
4. Well Location Unit Letter C: 200 feet from the North line and 1980 feet from the West line		
Unit Letter N		1980 feet from the West line
Section 29	Township 21S Range 33E	NMPM Lea County
Section	11. Elevation (Show whether DR, RKB, RT, GR, etc.	7
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON CHANGE PLANS COMMENCE DRILLING OPNS P AND A PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB DOWNHOLE COMMINGLE OTHER: 5' new hole MULTIPLE COMPL OTHER: 5' new hole MULTIPLE COMPL 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. 10/31/14 - Made 5' new hole. TD 95'. Hole size 20".		
Spud Date: 11/29/13	Rig Release Date:	
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I hereby certify that the information	n above is true and complete to the best of my knowledg	e and belief
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SIGNATURE / Cun -	TITLE Regulatory Reporting T	Sechnician DATE November 3, 2014
Type or print name Laura V	Watts E-mail address: laura@yatespetroleur	n.com PHONE:575-748-4272_
Type or print name Laura V For State Use Only	D-man address. iaura@yatespetroteur	111011D. <u>373-740-4272</u>
Accepted for Record Only		
APPROVED BY:	TITLE	DATE
Conditions of Approval (if any):		NOV: 0 5 2014

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