| Office Office  | State of                   | ot New Mex          | KICO             |  |  |               | C-103       |  |
|--|----------------------------|---------------------|------------------|--|--|---------------|-------------|--|
| District I – (575) 393-6161  | Energy, Minerals and N     |                     | al Resources     | [ <del>                                     </del> |  | Revised July  | 18, 2013    |  |
| 1625 N. French Dr., Hobbs, NM 88240  |                            |                     |                  |  | API NO.                                    | _             |             |  |
| <u>District II</u> – (575) 748-1283<br>811 S. First St., Artesia, NM 88210   | OIL CONSERVATION DIVISION  |                     |                  | <del></del>  | 30-025-41742                               |               |             |  |
| <u>District III</u> – (505) 334-6178   | 1220 South St. Francis Dr. |                     |                  |  | 5. Indicate Type of Lease  STATE   FEE   □ |               |             |  |
| 1000 Rio Brazos Rd., Aztec, NM 87410<br><u>District IV</u> – (505) 476-3460  | Santa Fe, NM 87505         |                     |                  |  | 6. State Oil & Gas Lease No.               |               |             |  |
| 1220 S. St. Francis Dr., Santa Fe, NM  |                            |                     |                  | l l  | VB-1632                                    |               |             |  |
| 87505  |                            |                     |                  | V D-   |  |               |             |  |
| SUNDRY NOTICES AND REPORTS ON WELLS  |                            |                     |                  |  | e Name or Unit                             | Agreement 1   | Name        |  |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A  |                            |                     |                  | June   | Junction BVJ State                         |               |             |  |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)  |                            |                     |                  | 8. Well  | Number                                     |               |             |  |
| 1. Type of Well: Oil Well  | Gas Well   Other           |                     | -                | 1H   |  | /             |             |  |
| 2. Name of Operator IAM 9 3 2015   |                            |                     |                  | 9. OGF   | UD Number                                  |               |             |  |
| Yates Petroleum Corporation  |                            |                     |                  |  | 025575                                     |               |             |  |
| 3. Address of Operator   |                            |                     |                  |  | ol name or Wild                            |               |             |  |
| 105 South Fourth Street, Artesia   | ı, NM 88210                | R                   |                  | Vacı   | ıum; Bone Sprii                            | ng, South     |             |  |
| 4. Well Location   |                            |                     |                  |  |  |               | -           |  |
| Unit Letter P :  | feet from the              | South               | line and         | 660  | feet from the                              | East          | line        |  |
| Unit Letter A  | 330 feet from the          | North               | line and         | 660  | feet from the                              | East          | line        |  |
| Section 36   | Township                   | 18S Rang            | ge 35E           | NMPM   | Lea  | County        |             |  |
|  | 11. Elevation (Show        |                     |                  |  | 1 14 14 1 6 13                             | ounty         | andrew 1    |  |
|  | <u> </u>                   | 3,830'              |                  |  |  |               |             |  |
| Expression and the second seco |                            |                     |                  |  |  |               |             |  |
| 12 Checl   | k Appropriate Box to       | Indicate Na         | ture of Notic    | e Report o   | or Other Data                              | ·             |             |  |
| 13. 01.60.   | a rippropriate Bon to      | marcare i va        |                  | c, report  | or other bata                              | •             |             |  |
| NOTICE OF  | INTENTION TO:              |                     | SU               | <b>JBSEQUE</b>                                     | NT REPOR                                   | RT OF:        |             |  |
| PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORI   |                            |                     |                  |  |  | ERING CASI    | NG 🗌        |  |
| TEMPORARILY ABANDON [  | ☐ CHANGE PLANS             |                     | COMMENCE D       | PRILLING OF  | PNS.□ PAN                                  | ID A          |             |  |
| PULL OR ALTER CASING   | ■ MULTIPLE COMPL           |                     | CASING/CEME      | ENT JOB  |  |               |             |  |
| DOWNHOLE COMMINGLE [   |                            |                     |                  |  |  |               |             |  |
|  |                            |                     |                  |  |  |               |             |  |
| OTHER:   |                            |                     |                  | new hole   |  |               | $\boxtimes$ |  |
| 13. Describe proposed or con   |                            |                     |                  |  |  |               |             |  |
|  | work). SEE RULE 19.15      | 5.7.14 NMAC.        | For Multiple (   | Completions:                                       | Attach wellbo                              | re diagram of | f           |  |
| proposed completion or   | recompletion.              |                     |                  |  |  |               |             |  |
| 1/19/15 – Made 5' new hole. TD   | 95' Hole size 20"          |                     |                  |  |  |               |             |  |
| 1/19/13 – Made 3 flew fiole. The   | 7 65 . Hole Size 20 .      |                     |                  |  |  |               |             |  |
|  |                            |                     |                  |  |  |               |             |  |
| Note: Set 30" culvert with lockin  | g device at 10' on 5/2/14  |                     |                  |  |  |               |             |  |
| Titole. Bet 30 Carrott With Tooking  | .g action at 10 on 5/2/11  |                     |                  |  |  |               |             |  |
|  |                            |                     |                  |  |  |               |             |  |
|  |                            |                     |                  |  |  |               |             |  |
|  |                            |                     |                  |  |  |               |             |  |
|  |                            |                     |                  |  |  |               |             |  |
|  |                            |                     |                  |  |  |               |             |  |
| Smud Data: 3/27  | //14                       | nı n.               |                  | -  |  |               |             |  |
| Spud Date:   | Ri                         | g Release Date      | e:               |  |  |               |             |  |
| <u> </u>   |                            |                     | <u> </u>         |  |  |               |             |  |
|  |                            |                     |                  |  | <u> </u>                                   |               |             |  |
| I hereby certify that the information  | on above is true and comp  | olete to the bes    | st of my knowle  | dge and beli                                       | ef.  |               |             |  |
| l  | A 1                        |                     |                  |  |  |               |             |  |
| OLONIA THIRD   | 11 10 that T               | ITI E Damil         | atam Danastina   | . Taskaisisa                                       | DATE <u>Jar</u>                            | 21 201        | -           |  |
| SIGNATURE / Cinc   | 1. 101/10/10 1.            | iice <u>kegul</u>   | atory Reporting  | z reconician                                       | _ DATEJar                                  | iuary 21, 201 | <u>J</u>    |  |
| Type or print nameLaura  | Watts E-mail               | address: <u>lau</u> | ra@yatespetrol   | eum com  | PHONE:                                     | 575-748-427   | 72          |  |
| For State Use Only   | vv atto E-mail i           | addiess. <u>iau</u> | nara kareshen or | cum.com  | I HONE.                                    | J1J-140-4Z    | 14          |  |
|  |                            | a                   |                  |  |  | /             | 1           |  |
| APPROVED BY:   | ed fo. Record $C_{ m TI}$  | TLE                 |                  |  | DATE                                       | 19/12         | 1/16        |  |
| Conditions of Approval (if any):   |                            | *******             |                  |  |  | - / / - /     | 101         |  |
| Conditions of Approval (if any):   |                            |                     |                  |  |  |               |             |  |