

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. 30-025-41670
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VB-2103
7. Lease Name or Unit Agreement Name Cranberry BSU State Com
8. Well Number 5H
9. OGRID Number 025575
10. Pool name or Wildcat Berry; Bone Spring, North

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 SUCH PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other **HOBSOCD**

2. Name of Operator
Yates Petroleum Corporation **FEB 09 2015**

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

4. Well Location
 Unit Letter P : 15 feet from the South line and 680 feet from the East line
 Unit Letter A : 331 feet from the North line and 674 feet from the East line
 Section 11 Township 21S Range 33E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3790' GR

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
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.

11/23/14 – RIH to 11,200' apply 1500 psi. Ran CBL from 11,200' to surface.
 12/19/14 – Tagged toe sleeve at 15,928'. Pumped 95 bbls 3% KCL with CRW-132. Displaced 240 bbls 3% KCL with CRW-132 chemical.
 1/6/15 – 1/10/15 - Perforated Bone Spring 11,261'-15,525' (504). Acidized perforations and toe sleeve with 81,500g 15% HCL acid and frac with a total of 4,419,525# 30/50 Econoprop and 20/40 ceramic prop.

Spud Date: 7/20/14 Rig Release Date: 10/21/14

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE *Tina Huerta* TITLE Regulatory Reporting Supervisor DATE February 5, 2015

Type or print name Tina Huerta E-mail Address: tinah@yatespetroleum.com PHONE: 575-748-4168

For State Use Only
Tina Huerta **Petroleum Engineer** 02/20/15
MAR 02 2015