| Submit 1 Copy To Appropriate District | State of New Mexico | Form C-103 |
|--|---|--|
| Office <u>District I</u> – (575) 393-6161 | Energy, Minerals and Natural Resource | Revised July 18, 2013 |
| 1625 N. French Dr., Hobbs, NM 88240 | | WELL API NO. |
| District II – (575) 748-1283 | OIL CONSERVATION DIVISION | 30-025-40518 |
| 811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178 | 1220 South St. Francis Dr. | 5. Indicate Type of Lease |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | | STATE SEE |
| <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 87505 | | VB-1220 |
| | TICES AND REPORTS ON WELLS | 7. Lease Name or Unit Agreement Name |
| | OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A | |
| | LICATION FOR PERMIT" (FORM C-101) FOR SUCH | 8. Well Number |
| PROPOSALS.) | Coa Well Cother HOBBS OCD | 1H |
| 1. Type of Well: Oil Well | Gas Well Other | 111 |
| 2. Name of Operator | Tanco de ciara | 9. OGRID Number |
| Yates Petroleum Corporation 3. Address of Operator | MAR 1 6 2015 | 025575 10. Pool name or Wildcat |
| • | NIM 00210 | |
| 105 South Fourth Street, Artesia, | RECEIVED | Featherstone; Bone Spring |
| 4. Well Education | | |
| Unit Letter A : | 100 feet from the North line and | 660 feet from theEast line |
| Unit Letter P | feet from the South line and | 660 feet from theEast line |
| Section 27 | Township 20S Range 35H | E NMPM Lea County |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | | |
| CARL HARLES CO. | 3667'GR | The state of the s |
| | | |
| 12 Check | Appropriate Box to Indicate Nature of Nor | tice Report or Other Data |
| 12. Check | Appropriate Box to indicate Nature of No. | dee, report of Other Data |
| NOTICE OF I | NTENTION TO: S | SUBSEQUENT REPORT OF: |
| PERFORM REMEDIAL WORK | | |
| TEMPORARILY ABANDON | | E DRILLING OPNS. □ P AND A □ |
| PULL OR ALTER CASING | 三 三 | - |
| DOWNHOLE COMMINGLE | | |
| CLOSED-LOOP SYSTEM | , , , , , , , , , , , , , , , , , , , | |
| OTHER: | 「 OTHER: In | itermediate casing |
| 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. | | |
| | | |
| | | |
| 2/24/15 – TD 12-1/4" hole to 5,35 | | |
| 2/25/15 – Set 9-5/8" 36#, 40# J-55 and HCK-55 LT&C casing at 5,355'. Cemented with 1240 sacks Class "C" + 0.2% D46 + 5% D020 + | | |
| 5#/sx D42 + 0.13#/sx D130 + 0.35% D13 + 5% D44 + 0.2% D65 + 0.09% D208 (yld 2.15, wt 12.80). Tailed in with 225 sacks Class | | |
| "C" $+ 0.2\%$ D46 $+ 4\%$ D020 $+ 0.13$ #/sx D130 $+ 0.4\%$ D13 $+ 0.1\%$ D65 (yld 1.73, wt 13.5). Circulated 105 sacks to the surface. | | |
| 2/26/15 – Pressure tested casing to 1200 psi for 30 mins, ok. Filled void around 9-5/8" casing with pea gravel. 2/27/15 – WOC 27 hours. Reduced hole to 8-3/4" and continued drilling. | | |
| 2/27/15 – WOC 27 hours. Reduce | d hole to 8-3/4" and continued drilling. | |
| | | |
| | | |
| Spud Date: 8/31/12 | Rig Release Date: | |
| Spud Date. | Rig Release Date. | |
| | | |
| | | |
| I hereby certify that the information | n above is true and complete to the best of my know | wledge and belief. |
| | | |
| CICNATURE A | 1 (atta) TITLE Partition Partition | The Table 17 10 ATE March 10 2015 |
| SIGNATURE TITLE Regulatory Reporting Technician DATE March 12, 2015 | | |
| Type or print name Laura Watts E-mail address: laura@yatespetroleum.com PHONE: 575-748-4272 | | |
| | Watts E-mail address: laura@yatespet | roleum.com PHONE: <u>575-748-4272</u> |
| For State Use Only | | |
| APPROVED BY: | TITLE Petroleum Fn | DATE 03/16/15 |
| Conditions of Approval (if any): | TITLE Petroleum En | ngineer DAIL O 110/1/ |
| Conditions of Approval (irally). | | |
| | | |