Submit I Copy To Appropriate District Office	State of New Mexico			Form C-103
<u>District I</u> – (575) 393-6161	Energy, Minerals an	nd Natural Resources		Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVA	ATION DIVISION	30-025-40220	
District III – (505) 334-6178	1220 South St. Francis Dr.		5. Indicate Type of Lea	
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505		STATE 🗵	FEE
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa i C,	11111 07303	6. State Oil & Gas Leas VB-1050	se No.
87505				
	CICES AND REPORTS ON		7. Lease Name or Unit	
(DO NOT USE THIS FORM FOR PROP DIFFERENT RESERVOIR. USE "APPL			. Warrior BRW State (Com /
PROPOSALS.)	ICATION FOR FERMIT (FORM	· ·	8. Well Number	
1. Type of Well: Oil Well	Gas Well Other	HOBBS OCD	1H	-
2. Name of Operator			9. OGRID Number	
Yates Petroleum Corporation		JUN 2 5 2015	025575	
3. Address of Operator		3011 20	10. Pool name or Wild	ľ
105 South Fourth Street, Artesia,	NM 88210		Wildcat; Bone Spring	
4. Well Location		RECEIVED		
Unit Letter D :	feet from the	North line and	660 · feet from the	West line
Unit Letter M	feet from the	South line and	feet from the	West line
Section 28	Township 23	S Range 35E	NMPM Lea	County
Section		ther DR, RKB, RT, GR, etc.		County
	Tr. Bievation (Snow whe	3364'GR	'	
	\			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
12. Clieck	Appropriate Box to mu	icale Nature of Notice,	Report of Other Data	
NOTICE OF I	NTENTION TO:	SUB	SEQUENT REPOR	PT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING				
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A				
PULL OR ALTER CASING .	= =	☐ CASING/CEMEN		
DOWNHOLE COMMINGLE		- O'NOM COCIMEN	1 00B	
CLOSED-LOOP SYSTEM				
OTHER:	J	OTHER: Pulled	packer and reset tubing	\bowtie
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.				
,				
6/2/15 – NU BOP. POOH with AS1-X packer and tubing.				
6/3/15 – Reset 2-7/8" 6.40# L-80 tubing at 10,970'.				
10/31/	11 5: 5	1 5	10/27/14	
Spud Date:	Rig Re	elease Date:		
				
I hereby certify that the informatio	n above is true and complete	to the best of my knowledg	e and belief.	
2.1.	. ^		•	
1	1) == 1			
SIGNATURE OUL C	Matter TITLE	E Regulatory Reporting T	echnician DATE Jun	<u>e 23, 2015</u>
Type or print name Laura Watts E-mail address: laura@yatespetroleum.com PHONE:575-748-4272				
For State Use Only				
ADDROVED BY VI ALL VIDA OF THE FOLIA STATE OF THE STATE O				
APPROVED BY: 1 UMU/LY JUMP TITLE THE . JUMP DATE 6 125/2015				
Conditions of Approval (if any)				
U				V

JUN 2 5 2015

MB