

HOBBS OCD

JUN 09 2016

RECEIVED

WELL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30-025-42807

5. Indicate Type of Lease

STATE FEE

6. State Oil & Gas Lease No.

VO-8879

7. Lease Name or Unit Agreement Name
Bedlow BWF State

8. Well Number

1H

9. OGRID Number

025575

10. Pool name or Wildcat

Wildcat; Bone Spring

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

2. Name of Operator

Yates Petroleum Corporation

3. Address of Operator

105 South Fourth Street, Artesia, NM 88210

4. Well Location

Unit Letter M 600 feet from the South line and 200 feet from the West line

Unit Letter P 660 feet from the South line and 330 feet from the East line

Section 29 Township 18S Range 36E NMPM Lea County

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

3,834' GR

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

NOTICE OF INTENTION TO:

- PERFORM REMEDIAL WORK PLUG AND ABANDON
TEMPORARILY ABANDON CHANGE PLANS
PULL OR ALTER CASING MULTIPLE COMPL
DOWNHOLE COMMINGLE
CLOSED-LOOP SYSTEM
OTHER:

SUBSEQUENT RECOMMENDATION:

- REMEDIAL WORK INT TO PA
COMMENCE DRILLING OPNS. P&A NR _____
CASING/CEMENT JOB P&A R _____
OTHER: _____

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.

Yates Petroleum Corporation plans to plug and abandon this well, present depth is 45'. 30" at 10' = 1.82 yd/3, 20" from 10'-45' (35' total) = 2.83 yd/3. Total true hole volume is 4.6 yd/3 allow 20% extra for hole enlargement. After filling well cut off locking device and install ground level dry hole marker. Clean up any disturbed area.

Spud Date:

12/30/15

NOTIFY OCD 24 HOURS PRIOR TO BEGINNING PLUGGING OPERATIONS

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 June 6, 2016

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

For State Use Only

APPROVED BY: Tina Huerta TITLE Petroleum Engr. Specialist DATE 6/13/2016

Conditions of Approval (if any):