Office Ningard and Notarral Decourage	Form C-103
District I Energy, Minerals and Natural Resources	WELL API NO.
1625 N. French Dr., Hobbs, NM 88240	30-025-39174
District II 1301 W Grand Ave., Artesia, NM SET CEI CONSERVATION DIVISION	5. Indicate Type of Lease
District III 1220 South St. Francis Dr.	STATE S FEE S
1000 Rio Brazos Rd., Aztec, NM 874 JAN 23 21119 Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr , Santa Fe, NMOBBSOCD 87505	VA-2003
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	/ Lease I tame of our rigidoment i amo
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	Kris BNB State Com
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other	8. Well Number
	9. OGRID Number
2. Name of Operator Yates Petroleum Corporation	9. OGRID Number 025575
3. Address of Operator	10. Pool name or Wildcat
105 South Fourth Street, Artesia, NM 88210	Eight Mile Draw; Mississippian
4. Well Location	
Unit Letter D: 660 feet from the North line and	660 feet from the West line
Section 27 Township 11S Range 34E	NMPM Lea County
11. Elevation (Show whether DR, RKB, RT, GR, etc.	C.)
4176' GR	1 to
12. Charle Annuariate Day to Indicate Nature of Nation	Papert or Other Date
12. Check Appropriate Box to Indicate Nature of Notice	, Report of Other Data
NOTICE OF INTENTION TO: SUI	BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WO	
	RILLING OPNS. P AND A
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEME	NT JOB L.
DOWNHOLE COMMINGLE	
OTHER: OTHER:	Drilling 5' of new hole
13. Describe proposed or completed operations. (Clearly state all pertinent details, a	
of starting any proposed work). SEE RULE 1103. For Multiple Completions: A	
or recompletion.	
1/21/09 Made 5' of new hole @ 12:00 noon. TD = 40'. Notified Sylvia Dickey w/Hobbs	s NMOCD via e-mail.
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	s NMOCD via e-mail.
Spud Date: Rig Release Date:	
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Spud Date: Rig Release Date: I hereby certify that the information above is true and complete to the best of my knowled SIGNATURE TITLE Regulatory Complian	ge and belief. ce Technician DATE1/22/09
Spud Date: Rig Release Date: I hereby certify that the information above is true and complete to the best of my knowled SIGNATURE TITLE Regulatory Complian Type or print name Allison Barton E-mail address: abarton@ypcnm.e	ge and belief. ce Technician DATE1/22/09
Spud Date: Rig Release Date: I hereby certify that the information above is true and complete to the best of my knowled SIGNATURE TITLE Regulatory Complian Type or print name Allison Barton E-mail address: abarton@ypcnm.s	ge and belief. ce Technician DATE 1/22/09 com PHONE: (575) 748-4385
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