Submit 3 Copies To Appropriate District \ Office	State of New Mexico	Form C-103
<u>District I</u>	Energy, Minerals and Natural Resources	June 19, 2008
1625 N French Dr., Hobbs, NM 88240 District II		WELL API NO. 30-025-38253
1301 W. Grand Ave, Artesia, NM 88210	OIL CONSERVATION DIVISION	6. Indicate Type of Lease
<u>District III</u> 1000 R10 Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE FEE
District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr , Santa Fe, NM		VA-1944
87505 SUNDRY NOTICE	ES 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		7. Zease Plante of Child Higherment Plante
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		Merle State Unit
1. Type of Well: Oil Well Gas Well Other		8. Well Number
		10
2. Name of Operator Yates Petroleum Corporation		9. OGRID Number
rates Petroleum Corporation /		025575
3. Address of Operator		10. Pool name or Wildcat
105 South Fourth Street, Artesia, NM 88210		Lane; Abo, Southeast
4. Well Location		
Unit Letter M : 33	0 feet from the South line and	330 feet from the West / line
		
Section 14	Township 10S Range 34E 11. Elevation (Show whether DR, RKB, RT, GR, et	NMPM Lea County
100	4189' GR	
Carrier by 1945 Arts 1952 195 19		
12 Check An	propriate Box to Indicate Nature of Notice	Report or Other Data
12. Check rip	propriate Box to maleate reating of rection	, report of Other Data
NOTICE OF INTE	ENTION TO: SU	BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐		
TEMPORARILY ABANDON 🔲 (_	RILLING OPNS.□ P AND A □
	MULTIPLE COMPL	NT JOB
DOWNHOLE COMMINGLE		
OTHER:	☐ OTHER:	Name Change
	ed operations. (Clearly state all pertinent details, a	
). SEE RULE 1103. For Multiple Completions: A	
or recompletion.	, 1	
	_	
	10 OPER. OGRID NO. 025575	RECEIVED
Former Well Name: Merle State Unit #10		
New Well Name: Merle BOG State #10 PROPERTY NO. 376. 26		MAR 0 9 2009
POOL CODE 306/6		
Effective 3/09/09	EFF. DATE 03-09-09	HOBBSOUD
	20 A25-28252	
	API NO. 30 - 025-38253	
<u></u>		
Spud Date:	Rig Release Date:	
I hereby certify that the information about	ove is true and complete to the best of my knowled	lge and belief.
-	*	-
$\bigcap_{A} A : A : A : A : A : A : A : A : A : A$	<u>L</u>	
SIGNATURE Allwords	TITLE Regulatory Complian	ce Technician DATE3/05/09
Type or print name Allison Barto	on E-mail address: <u>abarton@ypcnm.</u>	com PHONE: (575) 748-4385 .
	on E-mail address: <u>abarton@ypcnm.</u>	com PHONE: (575) 748-4385 .
Type or print name Allison Barto		com PHONE: (575) 748-4385 .