

State of New Mexico  
Energy, Minerals and Natural Resources

RECEIVED

AUG 20 2009

HOBBSOCD

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

|                                                                                                                                                                                                                                   |  |                                                                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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.)                     |  | WELL API NO.<br>30-025-39325                                                                        |
| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/>                                                                                         |  | 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator<br>Yates Petroleum Corporation                                                                                                                                                                                |  | 6. State Oil & Gas Lease No.<br>VO-6326                                                             |
| 3. Address of Operator<br>105 South Fourth Street, Artesia, NM 88210                                                                                                                                                              |  | 7. Lease Name or Unit Agreement Name<br>Reba BNT State                                              |
| 4. Well Location<br>Unit Letter <u>E</u> : <u>2310</u> feet from the <u>North</u> line and <u>990</u> feet from the <u>West</u> line<br>Section <u>32</u> Township <u>11S</u> Range <u>35E</u> NMPM <u>Lea</u> County <u>line</u> |  | 8. Well Number<br>6                                                                                 |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>4166' GR                                                                                                                                                                    |  | 9. OGRID Number<br>025575                                                                           |
|                                                                                                                                                                                                                                   |  | 10. Pool name or Wildcat<br>Llano; Upper Penn                                                       |

## 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 ☐

OTHER ☐

## SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
 COMMENCE DRILLING OPNS ☐ P AND A ☐  
 CASING/CEMENT JOB ☐

OTHER ☒ Drilling 5' of new hole

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

8/14/09 Made 5' of new hole @ 10:45 p.m. TD = 65'. Notified Sylvia Dickey w/Hobbs NMOCD via e-mail.

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Allison Barton TITLE Regulatory Compliance Technician DATE 8/17/09

Type or print name Allison Barton E-mail address: abarton@vpcuni.com PHONE: (575) 748-4385  
**For State Use Only**

APPROVED BY: [Signature] TITLE PETROLEUM ENGINEER DATE AUG 21 2009  
 Conditions of Approval (if any):