

RECEIVED

SEP 04 2009

HOBBSOCD

CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30-025-39325

5. Indicate Type of Lease

STATE ☒FEE ☐

6. State Oil & Gas Lease No.

VO-6326

7. Lease Name or Unit Agreement Name

Reba BNT State

8. Well Number

6

9. OGRID Number

025575

10. Pool name or Wildcat

Llano; Upper Penn

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 E : 2310 feet from the North line and 990 feet from the West line
Section 32 Township 11S Range 35E NMPM Lea County

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

4166' 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 ☐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.

9/02/09 Made 5' of new hole @ 10:30 p.m. TD = 70'. Notified Sylvia Dickey w/Hobbs NMOCD via e-mail.

Ground Water 70'
Depth

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 9/03/09Type or print name Allison Barton E-mail address: abarton@vpcnm.com PHONE: (575) 748-4385

For State Use Only

APPROVED BY: [Signature] TITLE DISTRICT 1 SUPERVISOR DATE SEP 08 2009

Conditions of Approval (if any):

FOR RECORD ONLY