Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103
Office District I	Energy, Minerals and Natural Resources	October 13, 2009
1625 N French Dr , Hobbs, NM 88240		WELL API NO. 30-025-37799 ✓
District II 1301 W. Grand Ave, Artesia, MASS 210	FOL CONSERVATION DIVISION	5. Indicate Type of Lease
District III	1220 South St. Francis Dr.	STATE FEE V
1000 Rio Brazos Rd., Aztec, NM AN 10 3 7 District IV 1220 S St. Francis Dr., Santa F. 1000	, -	6. State Oil & Gas Lease No. V-2443
		7. Lease Name or Unit Agreement Name
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		Lotus ALT State
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other		8. Well Number
Name of Operator Yates Petroleum Corporation	/	9. OGRID Number 025575
3. Address of Operator		10. Pool name or Wildcat
105 South Fourth Street, Artesia, 1	NM 88210	Livingston Ridge; Delaware Southeast
4. Well Location Unit Letter B:	330 feet from the North line and	2310feet from theEastline /
Section 32	Township 22S Range 32E	NMPM Lea County
Section 32	11. Elevation (Show whether DR, RKB, RT, GR, e	etc.)
	3553' GR -	
12 Check Ap	opropriate Box to Indicate Nature of Notice	ce, Report or Other Data
	,	JBSEQUENT REPORT OF:
NOTICE OF INT PERFORM REMEDIAL WORK □	PLUG AND ABANDON REMEDIAL W	_
. = •	, == = , = ,	DRILLING OPNS. P. AND A
	MULTIPLE COMPL CASING/CEM	ENT JOB 🔲 '
DOWNHOLE COMMINGLE · 🖸 ·		
OTUED:	□ OTHER:	Name Change
OTHER: 13 Describe proposed or comple	ted operations (Clearly state all pertinent details.	and give pertinent dates, including estimated date
of starting any proposed worl	k). SEE RULE 19.15.7.14 NMAC. For Multiple	Completions: Attach wellbore diagram of
proposed completion or recor	mpletion.	
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Former Well Name:	OPER. OGRID NO. 255	<u> 15 </u>
Lotus ALT State #12	PROPERTY NO. 3799 2	
NI Well Nome		we was some a sound
New Well Name: Lotus SWD #12	POOL CODE 34380	ngin yakunda naman kata di kiliki
Lotus BWD 1112	EFF. DATE 1-5-10	
Effective 1/05/10	APINO.30-025-37	799
	P' Palaca Data	
Spud Date:	Rig Release Date:	
I hereby certify that the information a	bove is true and complete to the best of my knowl	ledge and belief.
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Que in		· / -, · ·
SIGNATURE (Illusor)	TITLE Regulatory Compl	Linear Tarbaian DATE 1/12/10
		liance Technician DATE 1/12/10 .
Type or print name Allison Ba		DATE 1/12/10 Dieum.com PHONE: (575) 748-1471
Type or print name Allison Ba For State Use Only	rton E-mail address: <u>abarton@yatespetro</u>	pieum.com PHONE: (575) 748-1471
		<u>Dienm.com</u> PHONE: (575) 748-1471