Office	State of New Mexico	Form C-103
<u>District I</u>	Energy, Minerals and Natural Resources	WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II	TO THE CONCEDITATION DIVICION	30-025-39325
1301 W Grand Ave , Artesia, NN	CENTRONSERVATION DIVISION 1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 RIO BIAZOS RU. AZIEC, INVI 07410	C . T . T. ( 07/0/	STATE FEE 6. State Oil & Gas Lease No.
1220 S. St Francis Dr , Santa Fe, NM	4 1 9 5016	VO-6326
87505 <b>HO</b>	BBSOCD TICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROP DIFFERENT RESERVOIR. USE "APPI	PICES AND REPORTS ON WELLS POSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A LICATION FOR PERMIT" (FORM C-101) FOR SUCH	Reba BNT State
PROPOSALS.)  1. Type of Well: Oil Well	Gas Well  Other	8. Well 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, Arte	sia, NM 88210	Llano; Upper Penn
4. Well Location	2210 fort from the North Line and	000 fact from the West line
Unit Letter E: 2310 feet from the North line and 990 feet from the West line Section Section Township 11S Range, 35E NMPM Reg Leave County		
Section 32 Township 11S Range, 35E NMPM Age Leave County V		
	4166' GR	Section 18
12 Check	Appropriate Box to Indicate Nature of Notice	Report or Other Data
		•
-		BSEQUENT REPORT OF:  RK
PERFORM REMEDIAL WORK [ TEMPORARILY ABANDON [		RILLING OPNS. PANDA
_	☐ MULTIPLE COMPL ☐ CASING/CEMEN	
DOWNHOLE COMMINGLE		
OTHER.	npleted operations. (Clearly state all pertinent details, a	Drilling 5' of new hole
of starting any proposed of	work). SEE RULE 19.15.7.14 NMAC. For Multiple Co	ompletions: Attach wellbore diagram of
proposed completion or r		
1/11/10 Made 5' of new hole @ 1	11:00 a.m. TD = 105'. Notified Sylvia Dickey w/Hobbs	NMOCD via e-mail.
1/11/10 Wade 5 of new note & 1	1.00 u.m. 1D 100 . Houned Sylvia Blokey Wildow	THE CENTRAL PROPERTY.
Spud Date:	Rig Release Date:	
Spud Date:	Rig Release Date:	
	Rig Release Date: on above is true and complete to the best of my knowled	ge and belief.
I hereby certify that the information	on above is true and complete to the best of my knowled	
	on above is true and complete to the best of my knowled	
I hereby certify that the information	on above is true and complete to the best of my knowled	nce Technician DATE1/12/10
I hereby certify that the information	TITLE Regulatory Complian  Barton E-mail address: abarton@yatespetrole	nce Technician DATE1/12/10  nm.com PHONE:(575) 748-1471
I hereby certify that the information SIGNATURE Allison For State Use Only	TITLE Regulatory Complian  Barton E-mail address: abarton@yatespetrole	nce Technician DATE1/12/10  nm.com PHONE:(575) 748-1471
I hereby certify that the information  SIGNATURE	TITLE Regulatory Complian  Barton E-mail address: abarton@yatespetrole	nce Technician DATE1/12/10  num.com PHONE:(575) 748-1471
I hereby certify that the information SIGNATURE Allison For State Use Only	TITLE Regulatory Complian  Barton E-mail address: abarton@yatespetrole	DATE 1/12/10