

Submit To Appropriate District Office Two Copies District I 1625 N French Dr., Hobbs, NM 88249 District II 1301 W. Grand Avenue, Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S St Francis Dr., Santa Fe, NM 87505		State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505			Form C-105 July 17, 2008		
<div style="position: relative; height: 100px;"> <div style="position: absolute; top: 0; left: 0; width: 100%; height: 100%; background-color: black; color: white; font-size: 2em; font-weight: bold; text-align: center; line-height: 1;"> RECEIVED MAY 26 2010 HOBBSDO </div> </div>		1. WELL API NO. 30-025-36004 ✓					
		2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN					
		3 State Oil & Gas Lease No V-2443 ✓					
WELL COMPLETION OR RECOMPLETION REPORT AND LOG							
4. Reason for filing: <input checked="" type="checkbox"/> COMPLETION REPORT (Fill in boxes #1 through #31 for State and Fee wells only) SWD-1197 <input type="checkbox"/> C-144 CLOSURE ATTACHMENT (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33, attach this and the plat to the C-144 closure report in accordance with 19.15.17 13 K NMAC)					5. Lease Name or Unit Agreement Name Lotus SWD ✓		
7. Type of Completion: <input type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input checked="" type="checkbox"/> OTHER RECOMPLETION - SWD					6. Well Number: 1 ✓		
8. Name of Operator Yates Petroleum Corporation ✓					9. OGRID 025575 ✓		
10. Address of Operator 105 South Fourth Street, Artesia, NM 88210					11. Pool name or Wildcat SWD; Delaware ✓		
12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	
Surface:	A	32	22S	32E		660	
BH:							
13. Date Spudded 3/29/10 RC	14. Date T D. Reached 2/16/03	15. Date Rig Released NA		16. Date Completed (Ready to Produce) 5/17/10		17. Elevations (DF and RKB, RT, GR, etc) 3556' GR	
18. Total Measured Depth of Well 8620'		19. Plug Back Measured Depth 8576'		20. Was Directional Survey Made? No		21. Type Electric and Other Logs Run None	
22. Producing Interval(s), of this completion – Top, Bottom, Name 6744-6754', 7372-7572', 7866-7960' & 8432-8518' Delaware (Injection)							
23. CASING RECORD (Report all strings set in well)							
CASING SIZE	WEIGHT LB /FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED		
REFER TO ORIGINAL COMPLETION							
24. LINER RECORD				25. TUBING RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	
					2-7/8"	6611'	
26. Perforation record (interval, size, and number)				27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.			
				DEPTH INTERVAL			
				AMOUNT AND KIND MATERIAL USED			
				6744-8518' Acidized w/5000 gal 7-1/2% NEFE acid			
28. PRODUCTION							
Date First Production 1 st Injection 5/18/10		Production Method (Flowing, gas lift, pumping – Size and type pump)			Well Status (Prod or Shut-in) SWD		
Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF	Water - Bbl.	
Flow Tubing Press	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl	Gas - MCF	Water - Bbl	Oil Gravity - API - (Corr)	
29. Disposition of Gas (Sold, used for fuel, vented, etc.)					30. Test Witnessed By		
31. List Attachments None							
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit							
33. If an on-site burial was used at the well, report the exact location of the on-site burial:							
		Latitude		Longitude		NAD 1927 1983	
I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief							
Signature <u>Allison Barton</u>		Printed Name <u>Allison Barton</u>		Title <u>Regulatory Compliance Technician</u>		Date <u>5/18/10</u>	
E-mail Address <u>abarton@ypcnm.com</u>							

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INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well and not later than 60 days after completion of closure. When submitted as a completion report, this shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 11, 12 and 26-31 shall be reported for each zone.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico		Northwestern New Mexico	
T. Anhy	T. Canyon	T. Ojo Alamo	T. Penn. "A"
T. Salt	T. Strawn	T. Kirtland	T. Penn. "B"
B. Salt	T. Atoka	T. Fruitland	T. Penn. "C"
T. Yates	T. Miss (Lower)	T. Pictured Cliffs	T. Penn. "D"
T. 7 Rivers	T. Devonian	T. Cliff House	T. Leadville
T. Queen	T. Silurian	T. Menefee	T. Madison
T. Grayburg	T. Montoya	T. Point Lookout	T. Elbert
T. San Andres	T. Simpson	T. Mancos	T. McCracken
T. Glorieta	T. McKee	T. Gallup	T. Ignacio Otzte
T. Paddock	T. Ellenburger	Base Greenhorn	T. Granite
T. Blinebry	T. Gr. Wash	T. Dakota	
T. Tubb	T. Delaware Sand	T. Morrison	
T. Drinkard	T. Bone Springs	T. Todilto	
T. Abo	T. Rustler	T. Entrada	
T. Wolfcamp	T.	T. Wingate	
T. Penn (Upper)	T.	T. Chinle	
T. Cisco (Bough C)	T.	T. Permian	

OIL OR GAS SANDS OR ZONES

No. 1, from.....to.....
 No. 2, from.....to.....
 No. 3, from.....to.....
 No. 4, from.....to.....

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.....
 No. 2, from.....to.....feet.....
 No. 3, from.....to.....feet.....

LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness In Feet	Lithology	From	To	Thickness In Feet	Lithology
			REFER TO ORIGINAL COMPLETION				