Submit 1 Copy To Appropriate District Office	State of New Me		Form C-103
District I	Energy, Minerals and Natu	ral Resources	October 13, 2009
1625 N French Dr., Hobbs, NM 88240  District II			WELL API NO. 30-025-39713
1301 W Grand Ave, Artesia, NMS DECONSERVATION DIVISION			5. Indicate Type of Lease
District III 1000 Rio Brazos Rd , Aztec, NM 87410 Santa Fe, NM 87505			STATE S FEE S
District IV Santa Fe, NM 87505		303	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505 <b>HOBBSOCD</b>			VO-7380
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name
(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			Yellow Raider BPW State Com
PROPOSALS)  1. Type of Well: Oil Well  Gas Well  Other			8. Well Number
			1H /
2. Name of Operator  Votes Petrology Comparation			9. OGRID Number
Yates Petroleum Corporation  3. Address of Operator			025575  10. Pool name or Wildcat
105 South Fourth Street, Artesia, NM 88210			Red Hills; Bone Spring, East (Oil)
4. Well Location			
Unit LetterA:	660 feet from the North	line and 3	30 feet from the East line
Section 36	Township 24S F	Range 34E	NMPM Lea County, √
11. Elevation (Show whether DR, RKB, RT, GR. etc.)			
	3351'	GR	
12. Check Aj	opropriate Box to Indicate N	ature of Notice, I	Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR			
TEMPORARILY ABANDON			<del></del>
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	JOB 🗌
DOWNHOLE COMMINGLE			
OTHER:	П	OTHER:	Drilling 5' of new hole ⊠
13. Describe proposed or comple		pertinent details, and	give pertinent dates, including estimated date
		C. For Multiple Com	pletions: Attach wellbore diagram of
proposed completion or recor	mpletion.		
7/21/10 Made 5' of new hole @ 1:30	p.m. $TD = 40^{\circ}$ . Hole size $12-1/4^{\circ}$	". Notified Elidio G	onzales w/Hobbs NMOCD via e-mail.
Accepted f	o. Recent		
-	*		
			·
Spud Date: 4/1/10	Rig Release Da	te:	
Spud Date.	Kig Kelease Da		
I hereby certify that the information ab	pove is true and complete to the be	est of my knowledge	and belief.
	,		
SIGNATURE Allison	YNTOU TITLE Re	gulatory Compliance	e Technician DATE 7/23/10 .
ordinitions	CO (1070 ITTEL	guiatory Comphanice	DATE 7/23/10 .
Type or print name Allison Bar	ton E-mail address: <u>abar</u>	ton@yatespetroleum	.com PHONE: (575) 748-1471
For State Use Only	DETE	Mental Brown	<del>-</del>
APPROVED BY:	TITLE	DESCRIPTION OF THE PERSON OF T	DATE 2 7 2010
Conditions of Approval (If any):	Accepted for Record	Oniv	
182	and a	y	J.w.