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Submit 3 Copies To Appropriate District State of New Me	xico Form C-103	
Office District I Energy, Minerals and Natur	ral Resources Revised March 25, 1999	
1625 N. French Dr., Hobbs, NM 88240 District II	WELL API NO. 30-015-25533	
811 South First, Artesia, NM 88210 OIL CONSERVATION	5 Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87	STATE FEE	
District IV 2040 South Pacheco, Santa Fe, NM 87505	6. State Oil & Gas Lease No. LG-8368	
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 OF PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-18) FOR SUCH MESQUITE 2 STATE		
PROPOSALS.) 1. Type of Well:	NOV 2002 B	
Oil Well Gas Well Gother	RECEIVED	
2. Name of Operator Harvey E. Yates Company	CD - ARTESIA S. Well No. 5	
2 Address of Operator	9. Pool name or Wildcat	
P.O. Box 1933, Roswell, New Mexico 88202	Tamano Bone Spring	
4. Well Location		
Unit Letter N : 660 feet from the SOUTH	H line and 1980 feet from the WEST line	
Section 2 Township 18 S Range 31 E	NMPM County EDDY	
10. Elevation (Show whether D.	R, RKB, RT, GR, etc.)	
3767.5 11. Check Appropriate Box to Indicate Na		
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK ALTERING CASING	
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS. PLUG AND	
PULL OR ALTER CASING	CASING TEST AND	
COMPLETION	CEMENT JOB	
OTHER: ADD PERFORATIONS .	OTHER:	
12. 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 recompilation.		
Current perforations are in the Bone Spring Carbonate and Bone Spring 2 nd Sand (7,862' – 8,618' OAL).		
Harvey E. Yates Company proposes to do as follows: 1. Set a RBP to isolate the existing perforations 2. Perforate the Bone Spring 1 st Sand from 7,522' - 7,582' 3. Acidize and fracture stimulate new perforations 4. Put well back on production.		
Open to use BOPE		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE Seasetta Stram TITLE	Production Analyst DATE 11/18/02	
Type or print name Jeanetta Atkinson	Telephone No. 505-623-6601	
(This space for State use) ORIGINAL SIGNED BY TIM W. GUM		
APPPROVED BY DISTRICT II SUPERVISOR TITLE DATE		
Conditions of approval, if any:		