)Submit 3 Copies To Appropriate District Office	State of New Mexico		CISFO	Form C-103
District I	Energy, Minerals and Natural Resources		V I I I I I I I I I I I I I I I I I I I	Revised March 25, 1999
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
District II 811 South First, Artesia, NM 88210 OIL CONSERVATION DIVISION		<u>30-015-31808</u>		
District III 2040 South Pacheco		5. Indicate Type of Lease		
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505		STATE STATE FEE		
District IV 2040 South Pacheco, Santa Fe, NM 87505		6. State Oil & Gas Lease No.		
SUNDRY NOTICES AND REPORTS ON WELLS				V-3018
(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 PROPOSALS.) 1. Type of Well:			7. Lease Name or Unit Agreement Name:	
Oil Well Gas Well 🖂 Other			Cedar 32 State	
2. Name of Operator			7. Well No.	
Harvey E. Yates Company /			#2	
3. Address of Operator			8. Pool name or Wildcat	
P.O. Box 1933, Roswell, New Mexico 88202			Undes. Cedar Lake Morrow, East	
4. Well Location				
Unit Letter <u>N</u> :	660 feet from the So	uthline and	1,650 feet fro	m the <u>West</u> line
Section 32	Township 17S	Range 31		Eddy County
10. Elevation (Show whether DR, RKB, RT, GR, etc.)				
3,715' (GR)				
	propriate Box to Indicate N		-	
NOTICE OF INTE		SUB	SEQUENT RE	PORT OF:
		REMEDIAL WOR	—	
		COMMENCE DRI		PLUG AND
		CASING TEST AN CEMENT JOB	ND	
OTHER:		OTHER: Well c	ompletion	$\boxtimes$
12. Describe proposed or completed of starting any proposed work). So or recompilation.	operations. (Clearly state all possesses of the state all posses RULE 1103. For Multiple	ertinent details, and g Completions: Attac	give pertinent dates, h wellbore diagran	including estimated date n of proposed completion
11/02/01 Perf 11,814-11,825   waiting on gas conn			low well to clean u	p. Currently
11/05/01 Clean and move off	location.			
I hereby certify that the information a	bove is true and complete to the	ne best of my knowle	edge and belief.	
SIGNATURE Alaria	Kodgens TITLE	Production	Analyst	DATE11/27/01
Type or print name Dianna Ro	dgers		Telep	ohone No. 505-623-6601
(This space for State use)	ORIGINAL SIGNED I			OEC 1 2 200
APPPROVED BY	DISTRICT II SUPERI		<u>A set de la composition de la</u>	DATECATE
Conditions of approval, if any:		0ch		
		000	ARTESIA	