Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

DISTRICT I

## OIL CONSERVATION DIVISION

Form C-103 Revised 1-1-89

WELL API NO.

P.O. Box 2088	30-015-21599
DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210	5. Indicate Type of Lease STATE FEE X
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	6. State Oil & Gas Lease No.
DUNDOWNOTIONS AND DEPORTS ON WELLS	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	TO A 7. Lease Name or Unit Agreement Name
1. Type of Well:	
OL GAS WELL OTHER	Forehand
2. Name of Operator	8. Well No.
Harvey E. Yates Company 3. Address of Operator	9. Pool name or Windcat from 17 pr.
P.O. Box 1933, Roswell, New Mexico 88202	Sass Morrow
4. Well Location  Unit Letter K: 1980' Feet From The South Line and	1980' Feet From The West Line
	~ 11
Section 15 Township 23S Range 27E	NMPM Eddy County
3127 GL	
11. Check Appropriate Box to Indicate Nature of No.	tice, Report, or Other Data
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WO	
	DRILLING OPNS. PLUG AND ABANDONMENT
	AND CEMENT JOB
P1119	gback & Test Bone Springs
OTHER:	
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dowork) SEE RULE 1103.	utes, including estimated date of starting any proposed
1/12/90 Set CIBP @ 11,750' w/35' cmt on top 1/14/90 Spot 100' plug from 11,528-11,420' Spot 100' plug from 10,472-10,372'	
Set CIBP @ 8975; Tag top of cmt @ 8934'  1/17/90	7 1/2% RECEIVED
2/1/90 Put on production	<b>J</b> UL 27 '90
	Control of ARTESIA, OFFICE
I hereby cerufy that the information above is true and complete to the best of my knowledge and belief.	7/05/00
SKONATURE Jun W. Stern TIME Enginee	r
TYPE OR PRINT NAME TIM GUM	TELEPHONE NO.623-6601
(This space for State Use)  ORIGINAL SIGNED BY MIKE WILLIAMS	AUG 1 0 1990
APPROVED BY SUPERVISOR, DISTRICT IT	DATE
CONDITIONS OF APPROVAL, SP ANY:	