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	BU	MITED STATES PARTMENT OF THE IN PREAU OF LAND MANA	NTERIOR GEMENT		<b>&gt;</b>	FORM APPROVED OMB NO. 1004-0135 Expires: November 30, 2000  5. Lease Serial No. NMNM18232						
!	Do not use this	NOTICES AND REPO s form for proposals to l. Use form 3160-3 (API	iter an		6. If Indian, Allottee or Tribe Name							
=	SUBMIT IN TRIF	7. If Unit or CA/Agreement, Name and/or No.										
	'ype of Well	8. Well Name and No. URSA MAJOR 8 FEDERAL 1										
2 N	☑ Oil Well ☐ Gas Well ☐ Oth	Contact:	JEN ATKINSO	N.		9. API Well No. 30-025-34346						
<u> </u>	IARVEY E YATES COMPAN	Y	E-Mail: jatkinson	nclude area code)	de area code) 10. Field and Pool, or Exploratory							
É	Address PO BOX 1933 ROSWELL, NM 88202-1933		Ph: 505.623. Fx: 505.624.5	6601 Ext: 1219		NORTH YOUNG BONE SPRING						
4. [	ocation of Well (Footage, Sec., T.	, R., M., or Survey Description	n)		11. County or Parish, and State							
ş	Sec 8 T18S R32E SWNW 198	LEA COUNTY, NM										
	12. CHECK APPI	ROPRIATE BOX(ES) T	O INDICATE 1	NATURE OF N	OTICE, R	REPORT, OR OTH	ER DATA					
TYPE OF SUBMISSION TYPE OF ACTION												
	27.	☐ Acidize	☐ Deepen		☐ Production (Start/Resume)		☐ Water Shut-Off					
(	Notice of Intent	☐ Alter Casing	☐ Fracti	ire Treat	□ Reclar	mation	☐ Well Integrity					
	Subsequent Report	Casing Repair	☐ New	Construction	☐ Recomplete		☐ Other					
	☐ Final Abandonment Notice	Change Plans	Plug a	ind Abandon		orarily Abandon						
		☐ Convert to Injection			☐ Water Disposal							
	11/19/2003 Set CIBP @ 8100 Dumped 35' cmt on top of Cli 11/20/2003 Acidize perfs with 11/21-25/2003 Swab test wel 11/26/2003 RU Baker Atlas & w/200 bbls 2% KCl subs. 11/27/2003 LD 1 jt. 209 jts to PU, cln loc. PBTD 6640 (CIB	BP. Perf 6697-6702' w/3 a 3000 gals 15% NEFE a l. a set CIBP @ 6640'. Tes tal in hole. ND BOP. GIH	s spf, 15 holes, . cid. ct CIBP to 1000#	for 5 min & he								
14. I hereby certify that the foregoing is true and correct.  Electronic Submission #25650 verified by the BLM Well Information System  For HARVEY E YATES COMPANY, sent to the Carlsbad												
	Name (Printed/Typed) JEN ATK	INSON		Title AUTHORIZED SIGNATURE								
:	Signature (Electronic	Submission)		Date 12/04/2003								
		THIS SPACE F	OR FEDERA	L OR STATE	OFFICE	USE						
==					<u> </u>							
	pproved By			_ Title		Dat	8					
cert	ditions of approval, if any, are attach fy that the applicant holds legal or ea th would entitle the applicant to cond	quitable title to those rights in t	Office									
	e 18 U.S.C. Section 1001 and Title 4: ates any false, fictitious or fraudulent					make to any departmen	t or agency of the United					
"ORIGINAL "ORIGI												
			24	Toung	130.	ve spring	NOTH					
				-	•		- KA					