State of New Mexico

Energ linerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088		WELL API NO. 30-025-28146	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease STATE FEE	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.	
SUNDRY NOTICES AND REPORTS ON WELLS (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.)			7. Lease Name or Unit Agreement Name	
1. Type of Well: OIL GAS WELL X WELL OTHER			East Lovington "8"	
2 Name of Operator Harvey E. Yates Comp.	any		8. Well No. East Lovington 8 State # /	
3. Address of Operator P.O. Box 1933, Roswe			9. Pool name or Wildcat Lovington Penn NE	
4. Well Location		Line and 660	Feet From The East Line	
Section 8		Range 37E	NMPM Lea County	
	10. Elevation (Show wheth	er DF, RKB, RT, GR, etc.)		
11. Check NOTICE OF IN	Appropriate Box to Indicate	Nature of Notice, R	Report, or Other Data SSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON XX	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING	ALTER CASING CASING TEST AND C		EMENT JOB .	
OTHER:		OTHER:		
12. Describe Proposed or Completed Operwork) SEE RULE 1103. P & A PROCEDURE 1. PODH w/ TBB, ANCHOR & SN. 2. SET CIBP @ 11,425' PLUS 35' CMT. 3. PUMP 100' PLUB @ 9810' (TDP OF V. 4. PUMP 100' PLUB @ 5084' (TDP OF S. 5. PUMP 100' PLUB @ 5084' (TDP OF S. 6. CUT & PULL 5 1/2" AT 4800' + OR - 7. PUMP 100' PLUB (50' IN & OUT OF S. 8. PUMP 100' PLUB FROM 4556' TO 44' (ACROSS SHOE JT.) 9. PUMP 100' PLUB @ 2147' (TOP OF S. 10. PUMP 100' PLUB @ 450' (ACROSS SIDE JT.) 10. PUMP 100' PLUB @ 450' (ACROSS SIDE JT.) 11. PUMP 10 SX FURFACE PLUB & INS DRY HOLE MARKER. 12. CLEAN UP LOCATION.	WOLECAMEI TUBBI SAN ANDRESI CUT OFF 50° SALTI SHOE JTE	and give pertinent dates, incli	eding estimated date of starting any proposed	
I hereby certify that the information above is to	rue and complete to the best of my knowledge	nd belief. TITLE Prod. Mgr/End	gineer	
TYPE OF FRONT NAME Ray F.			TELEPHONE NO. 623-6601	
(This seem for State Like)	D BY JERRY SEXTON		JAN 0 2 199	

DISTRICT | SUPERVISOR

HIT CONTRISSION AUST SELECTION OF THE BOTH AND THE BOTH A

CONDITIONS OF AFFROVAL, IF ANY: