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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

| | |
|--------------------------------|---|
| 5a. Indicate Type of Lease | |
| State <input type="checkbox"/> | Fee <input checked="" type="checkbox"/> |
| 5. 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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

| | | |
|---|--|--|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Water Injection | | 7. Unit Agreement Name D.Q.SU. |
| 2. Name of Operator Cities Service Oil Company | | 8. Farm or Lease Name Tract 47 |
| 3. Address of Operator Box 69 - Hobbs, New Mexico 88240 | | 9. Well No. 2 |
| 4. Location of Well UNIT LETTER D , 660 FEET FROM THE North LINE AND 660 FEET FROM THE West LINE, SECTION 11 TOWNSHIP 14S RANGE 31E NMPM. | | 10. Field and Pool, or Wildcat Caprock Queen |
| 15. Elevation (Show whether DF, RT, GR, etc.) 4410 DF | | 12. County Chaves |

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☒

17. 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.

The above well was plugged and abandoned in the following manner:

1. Set a CI Bridge Plug @ 2900 (7" set @ 3046 w/125 sxs)
2. Set a 25 sack cement plug on top of bridge plug @ 2900-2775.
3. Loaded hole with mud laden fluid.
4. Set a 10 sack cement surface plug @ 30-0 with a 4" marker extending 4' above the surface to designate a P & A location.
5. Location has been cleared of all debris and equipment and is ready for final inspection.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

ORIGINAL SIGNED
C. D. ROBERTSON

SIGNED _____ TITLE **District Admin. Supervisor** DATE **11/17/70**

APPROVED BY **John W. Penyon** TITLE **1st** DATE **DEC 30 1970**

CONDITIONS OF APPROVAL, IF ANY: