Submit 3 Copies to Appropriate District Office

OTHER:

State of New Mexico Enc. by, Minerals 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. 30-005-

5. Indicate Type of Lease STATE X FEE 6. State Oil & Gas Lease No.

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

P.O. Drawer DD, Artesia, NM 88210

B-10420 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Drickey Queen Sand Unit

Type of Well: Tract 24 Injection OTHER WELL 8. Well No. Name of Operator Circle Ridge Production, Inc. 9. Pool name or Wildcat 3. Address of Operator c/o Oil Reports & Gas Services, Box 755, Hobbs, NM 88241 Caprock Queen Well Location 660 Unit Letter H : 1980 Feet From The North Line and _ Feet From The NMPM Chaves County 31 E 14 S Range Township 10. Elevation (Show whether DF, RKB, RT, GR, etc.)

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11.

SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: **ALTERING CASING** REMEDIAL WORK PERFORM REMEDIAL WORK PLUG AND ABANDON PLUG AND ABANDONMENT COMMENCE DRILLING OPNS. **CHANGE PLANS** TEMPORARILY ABANDON CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** Replace Tubing & Packer OTHER:

12. 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.

> Work began 9/21/91. Pulled cement lined tubing and packer. Ran 2 3/8" plastic lined tubing with Watson tension type packer set at 2900. Loaded annulus with fresh water mixed with corrosion inhibitor. Returned to injection 9/22/91.

I hereby certify that the information above is true and complete to the best of my knowled SIGNATURE TYPE OR PRINT NAME			dge and belief. Agent TITLE	DATE 9/26/91 TELEPHONE NO.
APPROVED BY			mæ	DATE

CONDITIONS OF APPROVAL, IF ANY: