NO. OF COPIES RECEIVED	-			Supersedes Old
DISTRIBUTION				C-102 and C-103
SANTAFE	H NEW MEXICO	OUL CONSERVATION COMMISS	SIUN	Effective 1-1-65
FILE	4			5a. Indicate Type of Lease
U.S.G.S.		JUL 29 3 22 MM '69		State K
LAND OFFICE	-	002 12		5. State Oil & Gas Lease No.
OPERATOR				•
			 	
SUNDS OD NOT USE THIS FORM FOR PR	RY NOTICES AND REI	PORTS ON WELLS PEN OR PLUG BACK TO A DIFFERENT RES -101) FOR SUCH PROPOSALS.)	ERVOIR.	
	TION FOR PERMIT -** (FORM C	-101) FOR SUCH PROPOSALS.)		7. Unit Agreement Name
l. OIL GAS GAS				Grain Queen Unit
WELL X WELL 2. Name of Cheritor	OTHER-			8. Farm or Lease Name
				S 9
GREAT WESTERN DRILLING	COMPANY			Sec. 8
Address of Operator				3
Box 1659 Midland, Tex	as 79701			10. Field and Pool, or Wildcat
		F		Caprock Queen
UNIT LUTTER $f C$,	1980 FEET FROM THE	East Line and 660	FEET FROM	
	_	10.0	-	
THE North LINE, SECT	ION TOWNS	HIP 13-S RANGE 32-	<u>е </u>	
mmmm	15 Floration (Show whether DF, RT, GR, etc.)	 	12. County
				Lea
	4378			
Check	Appropriate Box To	Indicate Nature of Notice,	_	
NOTICE OF I	INTENTION TO:		SUBSEQUENT	REPORT OF:
		<u></u>	·	
PERFORM REMEDIAL WORK	PLUG AND	ABANDON REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING C	PNS.	PLUG AND ABANDONMENT 🗶
PULL OR ALTER CASING	CHANGE PL	ANS CASING TEST AND CEM	ENT JQB	_
		OTHER		
OTHER				
	- <u>(Ö1 11</u>	landing the section of the section of	datas includina	estimated date of starting any proposed
17. Describe Proposed or Completed C work) SEE RULE 1103.	perations (Clearly state att	pertment details, and give pertment	dates, including	committee was an attacking any property
				_
On 3-31-69 this hole w	was loaded with m	ud and a 50 sack cemen	t plug spot	tted @ 3050:
745' of 4½" was pulled	 25 sack cemen 	t plugs were spotted i	n the 4½" រ	stub and @ 301'.
_				
A cleanup will be made	when the lease	equipment has been rem	oved.	
		•		
10. I hopely goverify that the informatic	on above is true and comple	te to the best of my knowledge and b	elief.	
18. I hereby certify that the information	on above is true and comple	te to the best of my knowledge and b	elief.	
18. I hereby certify that the information				
SIGNED OFFICE	O. H. Crews	te to the best of my knowledge and be		r DATE July 28, 1969
SIGNED OFFICE	O. H. Crews	TITLE Administrative		r DATE July 28, 1969
signed Officer	O. H. Crews	TITLE Administrative		
SIGNED OFFICE		TITLE Administrative		r DATE July 28, 1969