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LAND OFFICE	
OPERATOR	

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 Fee

5. State Oil & Gas Lease No.
E-11214

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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Injection Well	7. Unit Agreement Name
2. Name of Operator Tenneco Oil Company	8. Farm or Lease Name Mesa Queen Unit
3. Address of Operator 1860 Lincoln St., Suite 1200, Denver, Colorado 80203	9. Well No. 20
4. Location of Well UNIT LETTER P 990 FEET FROM THE South LINE AND 670 FEET FROM THE East LINE, SECTION 17 TOWNSHIP 16S RANGE 32E NMPM.	10. Field and Pool, or Wildcat Mesa Queen
15. Elevation (Show whether DF, RT, GR, etc.) 4360 DF	12. County Lea

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	Shut In <input checked="" type="checkbox"/>

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.

Status of Well: **Shut-In**

Approximate Date that Temp. Aband. Commenced: **6-74**

Reason for Temp. Aband.: **Water breakthrough in surrounding producing wells.**

Future Plans for Well: **Evaluating additional recovery methods.**

Approximate Date of Future W.O. or Plugging:

Expires 12-1-76

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

SIGNED *A.D. Myers* TITLE Div. Production Manager DATE 11-10-75

APPROVED BY *Jerry Simon* TITLE Dist. L. Supv. DATE NOV 13 1975

CONDITIONS OF APPROVAL, IF ANY: