| Submit 1 Copy To Appropriate District   | State of New Mex  | ico                          | Form C-103                           |
|---|---|------------------------------|--------------------------------------|
| Office  |   |                              | Revised August 1, 2011               |
| <u>District I</u> – (575) 393-6161  | Energy, Minerals and Natural Resources                  |                              | WELL API NO.                         |
| 1625 N. French Dr., Hobbs, NM 88240<br>District II – (575) 748-1283   |   |                              | WELL AFTNO.                          |
| 811 S. First St., Artesia, NM 88210   | OIL CONSERVATION DIVISION<br>1220 South St. Francis Dr. |                              | 30-005-62324                         |
| <u>District III</u> – (505) 334-6178  |   |                              | 5. Indicate Type of Lease            |
| 1000 Rio Brazos Rd., Aztec, NM 87410<br>District IV – (505) 476-3460  | Santa Fe, NM 875  | 505                          | STATE X FEE                          |
| 1220 S. St. Francis Dr., Santa Fe, NM   |   | 6. State Oil & Gas Lease No. |                                      |
| 87505   |   |                              |                                      |
| SUNDRY NOTICES AND REPORTS ON WELLS   |   |                              | 7. Lease Name or Unit Agreement Name |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A   |   |                              | 1. Deuse Hume of emerigieentent Hume |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH   |   | Marlisue Queen Unit          |                                      |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH CP<br>PROPOSALS.)<br>1. Type of Well: Oil Well X Gas Well Other HOBBS OCH |   | 8. Well Number 4Z            |                                      |
| 1. Type of well: Oil well X   | Type of well: Oil well X Gas well Other HODE            |                              | V                                    |
| 2. Name of Operator   |   |                              | 9. OGRID Number                      |
| State of New Mexico formerly Canyon E&P Company   |   |                              | 209004                               |
| 3. Address of Operator  |   | -N/ED                        | 10. Pool name or Wildcat             |
| 1625 N. French Drive Hob  | bs, NM 88240  | CEIVED                       | Double L; Queen (Assoc)              |
| 4. Well Location  |   |                              |                                      |
| Unit Letter K :   | 2480 feet from the South                                | line and                     | 2285feet from theWestline            |
| Section 24  |   | ange 29E                     | NMPM Chaves County                   |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)  |   |                              |                                      |
| 11. Elevation (Snow whether DR, RRD, R1; OR, etc.)  |   |                              |                                      |
|   |   |                              |                                      |
|   |   |                              |                                      |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  |   |                              |                                      |
|   |   |                              |                                      |
|   |   |                              | SEQUENT REPORT OF:                   |
|   |   |                              |                                      |
| TEMPORARILY ABANDON   |   | COMMENCE DRIL                |                                      |
| PULL OR ALTER CASING  |   | CASING/CEMENT                | JOB []                               |
| DOWNHOLE COMMINGLE  | P&A R   |                              |                                      |
| 071155  |   | 071155                       | _                                    |
| OTHER:  |   | OTHER:                       |                                      |
| 13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date           |   |                              |                                      |
| of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of                                    |   |                              |                                      |
| proposed completion or recompletion.  |   |                              |                                      |
|   |   |                              |                                      |
|   |   |                              |                                      |
|   |   |                              |                                      |
| SEE ATTACHED  |   |                              |                                      |
|   |   |                              |                                      |
|   |   |                              |                                      |
|   |   |                              |                                      |
|   |   |                              |                                      |
|   |   |                              |                                      |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief.  |   |                              |                                      |
|   |   |                              |                                      |
|   |   |                              |                                      |
| SIGNATURE   | TITLE   |                              | DATE                                 |
| The second se                                   |   |                              | DUCATE                               |
|   | E-mail address:   |                              | PHONE:                               |
| For State Use Only  |   |                              |                                      |
| ADDROVED BY ML J I.   | thetalan TITLE P.E.                                     | 5                            | DATE 05/16/2018                      |
| APPROVED BY:  | IIILE IT  | . <b>.</b> .                 | DATE                                 |
| Conditions of Approval (if any):  |   |                              |                                      |
|   |   |                              |                                      |

## Plugging Report Marlisue Queen Unit #4Z 30-005-62324

5/3/2018 Cleared location with backhoe and rigged up. Laid down 76 ¾" rods. Dug out wellhead and installed BOP. POOH with 59 joints 2 3/8" tubing.

5/4/2018 RIH with gauge ring and could not get past 933'. RIH with bit and scrapper to 1889'. POOH with scrapper and set CIPB at 1870'. Circulate MLF and test casing to 550#. Casing is good. Spot 50 sx cement on top of CIBP. POOH and perforate casing at 435'. Pumped cement down 5 ½" casing to perfs and up the annulus to surface. Took 135 sx. SION

5/7/2018 Rigged down, cut off, and filled both strings to surface with 15 sx cement. Installed marker, cut off anchors, and cleaned the pit.