

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-005-00869
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-5758
7. Lease Name or Unit Agreement Name Rock Queen Unit Sec. 26
8. Well No. 13
9. Pool name or Wildcat Caprock Queen
10. Elevation (Show whether DF, RKB, RT, GR, etc.) Unknown

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. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER
2. Name of Operator Circle Ridge Production, Inc.
3. Address of Operator c/o Oil Reports & Gas Services, Box 755, Hobbs, NM 88241
4. Well Location Unit Letter M : 660 Feet From The South Line and 660 Feet From The West Line Section 26 Township 13S Range 31E NMPM Chaves County

11. 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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <u>OCD Inspection</u> <input checked="" type="checkbox"/>	

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.

11/16/90 Dug out cellar. Oil Conservation Division representative inspected risers. Inspection O.K.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNATURE Blaine L. ... TITLE Agent DATE 11/27/90
TYPE OR PRINT NAME _____ TELEPHONE NO. _____

(This space for State Use)
APPROVED BY Stacy E. Turmancliff TITLE _____ DATE NOV 29 1990
CONDITIONS OF APPROVAL, IF ANY: