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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 <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	E - 744

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- WIW	7. Unit Agreement Name
2. Name of Operator Mobil Oil Corporation	8. Farm or Lease Name E.K. Queen Unit Tr. 8
3. Address of Operator P. O. Box 633, Midland, Texas 79701	9. Well No. 1
4. Location of Well UNIT LETTER K , 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 14 TOWNSHIP 18-S RANGE 33-E NMPM.	10. Field and Pool, or Wildcat E.K. Yates 7 Rivers Queen
15. Elevation (Show whether DF, RT, GR, etc.) 3919.5 GR	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 checked="" 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"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input 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.

Perforate additional perforations and stimulate Upper Queen Sand

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

SIGNED *[Signature]* TITLE **Authorized Agent** DATE **10/8/68**

APPROVED BY *[Signature]* TITLE DATE **10 1968**

CONDITIONS OF APPROVAL, IF ANY: