Submit 3 Copies To Appropriate District		
Office	State of New Mexico	Farm C to
District I Energy, I 1625 N. French Dr., Hobbs, NM 87240	Minerals and Natural Resources	Form C-103 Revised March 25, 1999
District II		WELL API NO.
\$11 South First, Artesia, NM \$7210 OIL CO	NSERVATION DIVISION	30-025-03248
1000 Rio Brazos Rd., Aztec, NM 87410 2040 South Pacheco		5. Indicate Type of Lease
District IV Santa Fo. NTM 07505		STATE X FEE
2040 South Pacheco, Santa Fe, NM 87505		6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS		E-1587
		7. Lease Name or Unit Agreement Name:
PROPOSALS.)		
1. Type of Well:		West Pearl Queen Unit
Oil Well Gas Well Other		- (Joen onit
2. Name of Operator		0 11/-11 )
	s Corporation	8. Well No. 118
P. O. Box 352		9. Pool name or Wildcat
4. Well Location Midland, TX 7	9702	Pearl Queen
. Sociation		reall Queen
Unit Letter J: 1980 feet from the South line and 1980 East		
icu i	rom the South line and	feet from the line
Section 29 Town	nship 198 Range 35E	I on
10. Elevation	(Show whether DR RKR PT CD	NMPM Lea County
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO	D: SUBS	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND AB	ANDON   REMEDIAL WORK	
TEMPORARILY ABANDON CHANGE PLAI	į.	ACTERING CASING
PULL OR ALTER CASING   MULTIPLE		ADAMBOUNT
COMPLETION	CASING TEST AN	D ABANDONMENT U
OTHER:	CEMENT JOB	
	OTHER: MT	T
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. For Multiple Completions: Attach wellbore discussions for the complete of the complete		
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion		
random or proposed completion		
A MIT was performed on this wall 2/21/02. The assistance of the cooper		
A MIT was performed on this well 2/21/02. The casing was pressured to 620 PSI over a		
30 minute period. The test was deemed successful. The chart is attached. Request TA Status.		
Status.		
	/	
<b></b>		~ 3**
Thi	s Approval of Temporary	
SQ#	ndonment Expires	7/30/07
		1
<u> </u>		
I hereby certify that the information above is true and	complete to the Land	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE (lugue Vaujor	THILE Production A	nalyst DATE 7/26/02
Angie Crawford Type or print name	A	DATE_
(This space for State use)	· · · · · · · · · · · · · · · · · · ·	915-683-3171 Telephone No.
Complete tot prate itself		
APPPROVED BY	Time	
Conditions of approval, if any:	TITLE	DATE
-	ONGOVALNOS SAS	
	- TOTAL MERCENTAL STATE OF THE STATE OF TH	• • • • • • • • • • • • • • • • • • • •
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