

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. <u>30-025-28274</u>
<del>Not Available</del>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name  State A A/C 2
8. Well No. 65
9. Pool name or Wildcat Eunice SR Queen-South
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR - 3559'

**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 ☐ GAS WELL ☐ OTHER ☒ Injection Well

2. Name of Operator  
Clayton W. Williams, Jr., Inc.

3. Address of Operator  
#6 Desta Dr., Suite 3000 Midland, Texas 79705

4. Well Location  
Unit Letter E : 1345 Feet From The North Line and 25 Feet From The West Line  
Section 9 Township 22S Range 36E NMPM Lea County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☒ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: ☐

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.

Estimated Start Date 12/23/91

- 1) Load tbg/csg annulsu w/field salt water (Packer @ 3703')
- 2) Pressure test csg to 500 psi for 30 minutes. Record test on chart for OCD subsequent report
- 3) Temporarily abandon well for future use.

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

SIGNATURE David G. Grafe TITLE Petroleum Engineer DATE 12/19/91

TYPE OR PRINT NAME David G. Grafe

TELEPHONE NO 915-682-632

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

THE COMMISSION MUST BE NOTIFIED  
24 HOURS PRIOR TO COMMENCEMENT OF WORK

DEC 24 1991