

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

DEC 11 '89

WELL API NO.

5. Indicate Type of Lease

STATE ☐ FED/FEE ☐

6. State Oil & Gas Lease No.

16496

7. Lease Name or Unit Agreement Name

Double "L" Queen Unit
Tract 8

8. Well No.

1

9. Pool name or Wildcat

Double "L" Queen Assoc.

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

2. Name of Operator

Burk Royalty Co. ✓

3. Address of Operator

P. O. Box BRC, Wichita Falls, Texas 76307

4. Well Location

Unit Letter D : 660 Feet From The North Line and 971 Feet From The West Line

Section 7 Township 15 S Range 30 E NMPM Chaves County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

GR 3904'

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.

Casing: 8 5/8" (24#) Set @ 416' with 300sxs.
4 1/2" (9.5#) Set @ 2039' with 200 sxs.
Perfs: 1990' to 2000'

Procedure:

Pull tubing and rods. Set 4 1/2" bridge plug @ 1925'.
Spot 15 sxs cement. Spot 15 sxs @ 1053'. Perf casing @ 400'. Pumped
150 sxs. No circ. Pumped 350 sxs circ. to pit. Work performed
11-21-89 to 11-28, 29. Will set marker.

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

SIGNATURE

Fred M. Lynch

TITLE

Petroleum Engineer

DATE 12-6-89

TYPE OR PRINT NAME

Fred M. Lynch

817/322-5421
TELEPHONE NO.

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*Rec'd Daily
Wrong Form*