

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

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-005-63099
Indicate Type of Lease STATE ☒ FEE ☐
State Oil & Gas Lease No.
Lease Name or Unit Agreement Name Marlisue Queen Unit
Well No. 1-2
Pool name or Wildcat Double L Queen

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.)	
Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER WIW ☐	
Name of Operator M. E. W. Enterprise	Well No. 1-2
Address of Operator 300 S. Kentucky Ave., Roswell, NM 88201	Pool name or Wildcat Double L Queen
Well Location Unit Letter <u>K</u> : <u>2165</u> Feet From The <u>FSL</u> Line and <u>1550</u> Feet From The <u>FWL</u> Line <u>24</u> Section <u>14S</u> Township <u>29E</u> Range <u>NMFM</u> Chaves County	
Elevation (Show whether DF, RKB, RT, GR, etc.)	

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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: ☐

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.

1. Notify O.C.D. 24 Hrs. before start P&A operations.
2. MIRU.. NU BOP POH w/ tbg.
3. Set CIBP @ 1875 w/ 35 ft. cmt. on top.
4. RIH w/ tbg. circ. hole w/ 9.8 # mud.
5. POH to 1300 ft. spot 100 ft. cmt. plug (bottom of salt). Min. 255X cement Plug. TAG
6. POH to 400 ft. spot 100 ft. plug (8 5/8 set @ 365 ft.) WOC & Tag 255X cement Plug 474' TAG
7. POH to 30 ft. circ. cmt. to surface.
8. Cut off well head & install dry hole marker.



Notific M.M.O.C.D. to witness Plugging Operations.

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

SIGNATURE Wayne Brooks TITLE Agent DATE 06-26-00
TYPE OR PRINT NAME Wayne Brooks TELEPHONE NO. 915-580-7161

(This space for State Use)

APPROVED BY Michael Stillefield TITLE Field Rep. II DATE 6/30/2000
CONDITIONS OF APPROVAL, IF ANY: