STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease: State [X] Fee [ ]

5. State Oil & Gas Lease No.: 6015

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 [X] GAS WELL [ ] OTHER-

7. Unit Agreement Name

2. Name of Operator: Westall - Mark ✓

8. Farm or Lease Name: State B

3. Address of Operator: P. O. Box 234 Loco Hills, N. Mex 88255

9. Well No.: #4

4. Location of Well: UNIT LETTER E, 330 FEET FROM THE West LINE AND 2310' FEET FROM THE North LINE, SECTION 2 TOWNSHIP 19-S RANGE 31 E NMPM.

10. Field and Pool, or Wildcat: Shugart T-Y-S-Q-G

15. Elevation (Show whether DF, RT, GR, etc.): 3614.3

12. County: EDDY

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK [X]	PLUG AND ABANDON [ ]	REMEDIAL WORK [ ]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]		COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]	CHANGE PLANS [ ]	CASING TEST AND CEMENT JOB [ ]	
OTHER [ ]		OTHER [ ]	

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.

Propose To Frac Lower Queen from 3592 - 3736'
Perforations 3592 - 96 - 98 - 3608 - 10 - 34 - 36 - 38 - 40 - 42 - 44 - 46 - 54 - 56 - 58 - 64 - 66 - 68 - 74 - 76 - 78 - 3700 - 04 - 06 - 32 - 34 - 36. (28 Holes) Set T Retrievable plug at 3770'
Will use 60,000 gallons 2% KCL water. Jelling agent 83,500 # 20/40 Sand. 1000 gallons 15% Acid
Flow down - Recover frac - put back on pump

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

SIGNED Carol A. Westall TITLE [ ] DATE 9-21-84

APPROVED BY Original Signed By Leslie A. Clements TITLE Supervisor District II DATE SEP 25 1984

CONDITIONS OF APPROVAL, IF ANY: