to Appropriate
District Office

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.
30-015-28458

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No.
—

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.)

7. Lease Name or Unit Agreement Name
Queen "22"

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER ✓

2. Name of Operator
BK Exploration Corp.

8. Well No.
3

3. Address of Operator
810 S. Cincinnati, #208 Tulsa, OK 74119

9. Pool name or Wildcat
Loving, East

4. Well Location
Unit Letter B : 990 Feet From The North Line and 2000 Feet From The East Line

Section 22 Township 23-S Range 28-E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3011' GR

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

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

RECEIVED
AUG 04 1995
OIL CON. DIV.
DIST. 2

7-20-95 Drilled (w/ air) 18" hole @ 0-40'. Ran conductor pipe. By Dowell, cemented w/ 50 sxs. class "c" cmt., circulated to surface. WOC.

7-21-95 Drilled (w/ fresh mud) 12.25" hole @ ~~40~~ 423 TD.

7-22-95 TIH w/ 10 jts. 8.625", 24# J-55 casing. Set @ 0-413'. By BJ Services, cemented w/ 320 sxs. class "c" cmt., 2% CaCl2. Flushed plug, circulated 33 sxs. to pit. WOC 18 hrs. Tested csg. @ 1000#, held OK. Tested BOP, held OK.

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

SIGNATURE Brad D. Burks TITLE VP- Operations DATE 7-26-95

TYPE OR PRINT NAME Brad D. Burks TELEPHONE NO. 918-582-3863

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY TIM W. GUM DISTRICT II SUPERVISOR TITLE DATE AUG 7 1995

CONDITIONS OF APPROVAL, IF ANY: