Submit 3 Copies To Appropriate District Office DISTRICT I	State of New Mexico Energy, Minerals and Natural Resources		Form C-103 Revised March 25, 1999.
1625 N. French Dr., Hobbs, NM 88240 DISTRICT II	OIL CONSERVATION DIVISION		L API NO. 5-01163-00-00
811 South First, Artesia NM 88210 DISTRICT III	2040 South Pacheco		indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> 2040 S. Pacheco, Sants Fe, NM 87505	Santa Fe, NM 87505		TATE FEE ate 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)			asc Name or Unit Agreement Name:
1. Type of Well: Oil Well X Gas Well Other			TH CAPROCK QUEEN UNIT
2. Name of Operator Kevin O. Butler & Associates, Inc.			ell No.
3. Address of Operator POB 1171, Midland, TX 79702		B.	ol name or Wildcat ROCK QUEEN (08559)
4. Well Location			
Auril 20			
Section 28	Township 14S Elevation (Show whether DF, RK	Range 31E B. RT. GR. etc.)	NMPM CHAVES County
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			
PULL OR ALTER CASING MULT COMP	-		
OTHER: REMEDIAL ASSESSMENT	IX OTHE	t :	
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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.			
Shoot Fluid Level by 12/5/00.			
If fluid level is below fresh water level-evaluate for 90 to 120 days to return to production.			
Shoot Fluid Level by 12/5/00. If fluid level is below fresh water level-evaluate for 90 to 120 days to return to production. If fluid level is above fresh water level-pull well set CIBP and follow up to Plug & Abandon. Mo subsequent 103 Showing work done. 19/24/01 - Cul			
•			showing work doke.
			10/24/01 - Cal
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE	TITLEPres	ident	DATE 11/29/00
Type or print name Kevin O. Butter	PEROFE EXAM	INER	Telephone No.915/682-1178
(This space for State use)	Le tank	! }	
APPROVED BY		M DIAISION	DATE
Conditions of approval, if any:	OCD EXHIBIT NO. 126		
	CASE NO: 12758-A		
	CASE NO.	THE RESERVE THE PROPERTY OF THE PARTY.	