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RECEIVED
NEW MEXICO OIL CONSERVATION COMMISSION
APR 25 1975
O. C. C.
ARTESIA, OFFICE

Form C-103
 Supersedes Old
 C-102 and C-103
 Effective 1-1-65

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. State <u>R-8385-2</u>
7. Unit Agreement Name
8. Farm or Lease Name <u>Honolulu-State</u>
9. Well No. <u>6</u>
10. Field and Pool, or Wildcat <u>Coyote Queen</u>
12. County <u>Chaves</u>

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator <u>Paul Slayton</u>
3. Address of Operator <u>P O Box 1936 Roswell, N Mex. 88201</u>
4. Location of Well UNIT LETTER <u>I</u> <u>2310</u> FEET FROM THE <u>So</u> LINE AND <u>990</u> FEET FROM THE <u>East</u> LINE, SECTION <u>11</u> TOWNSHIP <u>11 S</u> RANGE <u>27 E</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	

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.

Temp. Shut In due to lack of electricity, will have back on production,
 Request 1 BBL Per day.

*allowable will be assigned upon receipt of Form C-127
 reporting a test*

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

SIGNED Ruby Wickham TITLE Clerk DATE 4/23/75
 APPROVED BY W. A. Grissett TITLE SUPERVISOR, DISTRICT II DATE MAY 21 1975
 CONDITIONS OF APPROVAL, IF ANY: Expires 10-1-75