

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

CISF
OP

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.
30-005-00280

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
B 8385-0

7. Lease Name or Unit Agreement Name

Honolulu State

8. Well No. #4

9. Pool name or Wildcat
Coyote 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.)

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

2. Name of Operator
Mountain States Petroleum Corporation

3. Address of Operator
P.O. Box 1936, Roswell, NM 88202-1936

4. Well Location
Unit Letter F : 1650 Feet From The North 1650 Feet From The West
Line and Line

Section 14 Township 11S Range 27 E NMPM Chaves Chaves County

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

3747

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: ☐

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.

This well was plugged 8/21/97 as approved by OCC on 7/30/97

Cement was pumped by Phil Straley (K&M Oil) and was witnessed by Mr. Livingston of the Artesia, NM OCC.

Location has been leveled and dry hole marker set.

201A

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

SIGNATURE Paul Straley TITLE Agent DATE 12-28-00

TYPE OR PRINT NAME TELEPHONE NO.

(This space for State Use)

APPROVED BY DATE 1/28/01

CONDITIONS OF APPROVAL, IF ANY: