

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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.

30-005-60007

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.
(676-1) L-206

7. Lease Name or Unit Agreement Name

Huber State

8. Well No.

1

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 N : 330 Feet From The S Line and 2310 Feet From The W Line

Section 9

Township 11S

Range 27E

NMPM

Chaves

County

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

3672

11.

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 7-21-97 as approved by OCC on April 21, 1997.

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.

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

[Signature]

TITLE

[Signature]

DATE

1/09/01

CONDITIONS OF APPROVAL, IF ANY: