

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.	60024 30-005-10004
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	E8879
7. Lease Name or Unit Agreement Name	McAlester State
8. Well No.	6
9. Pool name or Wildcat	Coyote Queen
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3670.9

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 Corp.

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

4. Well Location
Unit Letter K : 1980 Feet From The South Line and 2310 Feet From The West Line
Section 10 Township 11-S Range 27-E 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 <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

MIRU. Pull all rods, pump and tubing.
RIW with tubing, open ended to bottom of perms.
Pump 40 sks cement, pull 1/2 tubing.
Pump cement until circulated--pul tubing and fill void.
Set dry hole marker and level and clean location.

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

SIGNATURE Jim Andrew TITLE Agent DATE 7/25/97
TYPE OR PRINT NAME _____ TELEPHONE NO. _____

(This space for State Use)

APPROVED BY Jim W. Gurn TITLE DISTRICT II SUPERVISOR DATE 7/30/97

CONDITIONS OF APPROVAL, IF ANY: