

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-101  
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

JAN 10 1991

WELL API NO. 30-005-62815
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. V-3191
7. Lease Name or Unit Agreement Name Rickey "A"
8. Well No. 1
9. Pool name or Wildcat Double L (Queen) Assoc.

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR RE-ABANDON A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator Collins Oil & Gas Corporation	
3. Address of Operator P.O. Box 2443, Roswell, NM 88202-2443	
4. Well Location Unit Letter K : 2310 Feet From The South Line and 2310 Feet From The West Line Section 14 Township 14S Range 29E. NMPM Chaves County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3750 GL	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b>	<b>SUBSEQUENT REPORT OF:</b>
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <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.

1-4-91 Spudded hole at 8:00 a.m.

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

SIGNATURE Roy D. Collins TITLE Pres. Collins O/G DATE 1-8-91  
TYPE OR PRINT NAME ROY D. COLLINS TELEPHONE NO. 623-2040

(This space for State Use)  
APPROVED BY MIKE WILLIAMS TITLE SUPERVISOR, DISTRICT II DATE JAN 14 1991  
CONDITIONS OF APPROVAL, IF ANY: