Submit 3 Copies To Appropriate District Office State of New District I 1625 N. French Dr., Hobba, NM 88240  Energy, Minerals and I		Form C-103 Revised March 25, 1999 WHILL API NO.
District II 811 South First, Artesia, NM 88210 OIL CONSERVAT	MOISIVITA MOI	30-025-35965
District III		5. Indicate Type of Lease
District IV Santa Fe. N		STATE I FEE
2040 South Pacheco, Santa Fe, NM 87505		6. State Oil & Gas Lease No.
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.)		7. Lease Name or Unit Agreement Name:
1. Type of Well; Oil Well		.New Mexico G State
2. Name of Operator Joe Melton Drilling Co., Inc.		8. Well No. 33
3. Address of Operator	9704	9. Pool name or Wildcat Eumont Yates 7 Rvrs Queen oil
4. Well Location *	370+	Lumoite lates / KVI's Queen OT
Unit Letter B: 330 feet from the No	orth line and	1653 feet from the <u>East</u> line
Section 26 Township 21S		NMPM Lea County
10. Elevation (Show wheth	er DR, RKB, RT, GR, et	c.)
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK PLUG AND ABANDON		SEQUENT REPORT OF:
TEMPORARILY ABANDON	COMMENCE DR	LILLING OPNS. PLUG AND
PULL OR ALTER CASING   MULTIPLE COMPLETION	CASING TEST A	ABANDONMENT ABANDONMENT
OTHER:		menting Casing
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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.		
10/8/02 MIRU Capstar Rig #1, drill 12-1/4 casing. Set @ 404'. Cement w/250 Cement circulated to surface.	hole to 405'. sx. Class C cem	Ran 9 jts. 24# 8-5/8" surface ent and 2% Calcium Chloride.
10/14/02TD 3868', Ran 5-1/2" 15.50# casin followed by 395 sx. tail cement,	g, set @ 3867¹.	Cemented w/350 sx. lead cement
surface.	pump prug domi n	//
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		FLUL ALD Hobbs OCD
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		30000
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE WALL COLOR	TLE Secretary	DATE11/7/02
Type or print name Karen Allen		Telephone No. 915 682-5461
(This space for State use)	ÖRİĞINAL SIĞ	NED BY
10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	PAUL F. K	NOV 2 6 2002
Conditions of approval, if any:	PETROLEUM E	NGINEE <b>R</b>
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