Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resource	WELL API NO.30-025-30152
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	(6
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE X FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
87505	CEC AND DEPORTS ON WELLS	B9311
(DO NOT USE THIS FORM FOR PROPOS	CES AND REPORTS ON WELLS ALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name West Dollarhide Queens Sand Unit
1. Type of Well: Oil Well X	Gas Well Other	8. Well Number 89
2. Name of Operator Chaparral En	nerov II C	9. OGRID Number 004115
Address of Operator Oklahoma C Oklahoma C		10. Pool name or Wildcat Dollarhide Queen
4. Well Location		
Unit Letter :	1500' feet from the South line and	
Section <u>32</u>	Township 24 S Range 38	
	11. Elevation (Show whether DR, RKB, RT, G.	R, etc.)
Pit or Below-grade Tank Application on	Closure water_ <u>350'</u> Distance from nearest fresh water well	
		bls; Construction Material
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL	
The second secon		E DRILLING OPNS. P AND A
TOLL ON ALTER CASING	MOLTIPLE COMPL CASING/CE	EMENT JOB
OTHER:	OTHER:	Repair tubing leak
13. 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 recompletion.		
or recompletion.		
Digging pit and lining it to contain the produced water that flows from the well while completing this task		
We wish to dis the nit on 01/27/6 and installed the nit of 02/07/6.		
We wish to dig the pit on 01/27/6 and intend to close the pit on 02/03/06 - Mid to close according to Rule 50 and quidelines for pet closure.		
according to Rule 50 and quidelines for pet closure. Che		
	anot ord	
	6.00	FAXED
	A College St.	JAN 2 7 2006
		BY WES
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed a coording to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.		
SIGNATURE Seem	TITLE Production Fo	<u>rman</u> DATE <u>01/27/06</u>
Type or print name For State Use Only	E-mail address:	Telephone No.
APPROVED BY:	Selliance TITLE Dist	Supervisor DATE 1/31/06