

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised August 1, 2011

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-005-92099- 62099
5. Indicate Type of Lease STATE X FEE ✓
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Marlisue Queen Unit ✓
8. Well Number 2 ✓
9. OGRID Number 269864 ✓
10. Pool name or Wildcat Double L; Queen (Assoc) ✓

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 Injection **HOBBS OCD**

2. Name of Operator
 State of New Mexico formerly Canyon E&P Company **R-7422 MAY 16 2018**

3. Address of Operator
 1625 N. French Drive Hobbs, NM 88240 **RECEIVED**

4. Well Location
 Unit Letter K: 2165 feet from the South line and 1550 feet from the West line
 Section 24 Township 14S Range 29E NMPM Chaves County ✓

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<p>NOTICE OF IN</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/></p> <p>DOWNHOLE COMMINGLE <input type="checkbox"/></p> <p>OTHER: _____</p>	<p>INT TO PA</p> <p>P&A NR <u>PM</u></p> <p>P&A R _____</p>	<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/></p> <p>CASING/CEMENT JOB <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p>ALTERING CASING <input type="checkbox"/></p> <p>P AND A <input checked="" type="checkbox"/></p>
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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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

SEE ATTACHED

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

SIGNATURE _____ TITLE _____ DATE _____

Type or print name _____ E-mail address: _____ PHONE: _____

For State Use Only

APPROVED BY: Mark Whitaker TITLE P.E.S. DATE 05/16/2018

Conditions of Approval (if any):

Plugging Report
Marlisue Queen Unit #2
30-005-62099

5/8/2018 Cleared location and moved equipment. Installed BOP and unset packer. Packer was swabbing fluid up the wellbore. Caught fluid with vac. POOH with 56 joints 2 3/8" IPC tubing. SION

5/9/2018 Set CIBP @ 1850'. Circulate MLF and tested casing to 600#. Casing was good. Spot 50 sx cement on top of CIPB. POOH to 488' and circulate cement to surface with 35 sx cement. Rig adown and cut off wellhead. Filled up both strings with 20 sx cement. Installed marker, cut off anchors, cleaned the pit and cleared the location.