Submit 3 Copies To Appropriate District Office District I 1625 N French Dr., Hobbs, NM	Form C-103 May 27, 2004
District II 1301 W. Grand Ave., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410  OIL CONSERVATION DIVISION 1220 South St. Francis Dr. South Fo. NIM 87505	5. Indicate Type of Lease STATE FEE   6. State Oil & Gas Lease No.
District IV 1220 S St. Francis Dr., Santa Fe, NHOBBSOCD 87505  SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	West Dollarhide Queen Sand Unit  8. Well Number
1. Type of Well: Oil Well Gas Well X Other Injector  2. Name of Operator	9. OGRID Number
Chaparral Energy, L.L.C. /	4115
3. Address of Operator 701 Cedar Lake Blvd., Oklahoma City, OK 73114	10. Pool name or Wildcat <b>Dollarhide Queen Sand</b>
4. Well Location	Donai mue Queen Banu
Unit Letter F : 2240 feet from the North line and 22  Section 30 Township 24S Range 38E	T
Section Township Range	NMPM Lea County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
Pit or Below-grade Tank Application or Closure	1.
	nnce from nearest surface water
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Co	nstruction Material
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WORK  TEMPORARILY ABANDON  CHANGE PLANS  COMMENCE DRILL  PULL OR ALTER CASING  MULTIPLE COMPL  CASING/CEMENT	LING OPNS. P AND A
OTHER:  OTHER:  OTHER:  OTHER:	give pertinent dates, including estimated date
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Att or recompletion.	
Injection well developed hole in tubing. Will POOH w/ injection tubing and pkr. Re-dress packer to re-use. Hydrostatically test tubing and replace bad joints. Re-run injection tubing and packer. Set in tension @ approximately 3850'. Run MIT witnessed by OCD personnel.	
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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 according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.	
SIGNATURE Authority Affairs DATE 06/22/2010	
Type or print name David P. Spencer  E-mail address:  david.spencer@chapar	
APPROVED BY: TITLE SAFE	Telephone No. 405-426-4397 ralenergy.com