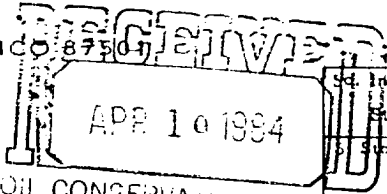


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LAND OFFICE	
OPERATOR	



Indicate Type of Lease  
State ☒ Fee ☐  
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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name Northeast Caprock Queen Unit
2. Name of Operator MR Oil Company	8. Farm or Lease Name Northeast Caprock Queen Unit
3. Address of Operator P. O. Box 685, Monahans, Texas 79756	9. Well No. 7
4. Location of Well UNIT LETTER <u>SM</u> <u>660</u> FEET FROM THE <u>South</u> <u>North</u> LINE AND <u>660</u> FEET FROM <u>West</u> <u>East</u> THE LINE, SECTION <u>16</u> TOWNSHIP <u>12-S</u> RANGE <u>32-E</u> WMPM.	10. Field and Pool, or Wildcat Caprock Queen
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <u>Test Production Capacity</u> <input checked="" type="checkbox"/>	OTHER <input checked="" type="checkbox"/>

17. 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.

Removed from TA and placed on production to determine if economically feasible to remain on production status.

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

SIGNED <u>[Signature]</u>	TITLE <u>Production Clerk</u>	DATE <u>3-24-84</u>
ORIGINAL SIGNED BY <u>JERRY DEXTON</u>		
DISTRICT 1 SUPERVISOR		
APPROVED BY	TITLE	DATE <u>APR 25 1984</u>
CONDITIONS OF APPROVAL, IF ANY:		

