

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-76

NO. RECEIVED		
DISTRIBUTION		
DATE		
FILE		
U.S.C.S.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Free <input type="checkbox"/>

5. State Oil & Gas Lease No.
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SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO STOP 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 North-east Caprock Queen Unit
2. Name of Operator MR Oil Company	8. Farm or Lease Name North-east Caprock Queen Unit
3. Address of Operator P. O. Box 685, Monahans, Texas 79756	9. Well No. 9
4. Location of Well UNIT LETTER 0 , 660 FEET FROM THE South LINE AND 1980 FEET FROM THE East LINE, SECTION 16 TOWNSHIP 12-S RANGE 32-E NMPM.	10. Field and Pool, or Widest Caprock Queen
15. Elevation (Show whether DF, RT, GR, etc.) 4372 DF	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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input 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.

To replace well on TA status. Well was tested and was deamed uneconomical to produce at this time. Final disposition of the well will be proposed after testing of other wells in the unit. Well was SI on February 15, 1983.

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

SIGNED Chris Hisel Chris Hisel TITLE Superintendent DATE March 19, 1984

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE APR 2 1984

CONDITIONS OF APPROVAL, IF ANY: Expired 10/1/76 (2nd)

