

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-73

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DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

5a. Indicate Type of Lease

State ☒ Fee ☐

5. State Oil & Gas Lease No.

B-9946

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Water Injection		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 Box 685, Monahans, Texas 79756		9. Well No. 15
4. Location of Well UNIT LETTER B 1983 FEET FROM THE East LINE AND 660 FEET FROM THE North LINE, SECTION 20 TOWNSHIP 12S RANGE 32E NMPM.		10. Field and Pool, or Whdcat Caprock Queen
15. Elevation (Show whether DF, RT, GR, etc.) 4384 DF		12. County Lea

16. 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.

1. Set 5½" Cast Iron Bridge Plug @ 2950'±
2. Dump or spot 35' cement on top of B.P.
3. Load hole with 9.5# brine mud.
4. Test casing to 500 psi.
5. Temporarily abandon for lease evaluation.

THE COMMISSION MUST BE NOTIFIED
24 HOURS PRIOR TO COMMENCING WORK

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

SIGNED Bill Mynelue TITLE Consultant DATE 9/10/84

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT 1 SUPERVISOR TITLE DATE SEP 17 1984

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

SEP 14 1984

OFFICE
HOBBS OFFICE