

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION  
P. O. BOX 2089  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-

3c. Indicate Type of Lease  
State ☒ Fee ☐

5. State Oil & Gas Lease No.  
E-3499

7. Unit Agreement Name  
Northeast Caprock Queen  
Unit

8. Farm or Lease Name  
Northeast Caprock Queen  
Unit

9. Well No.  
32

10. Field and Pool, or WHdcat  
Caprock Queen

12. County  
Lea

**SUNDY NOTICES AND REPORTS ON WELLS**  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REFRIN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. ☒ OIL WELL ☐ GAS WELL ☐ OTHER-

2. Name of Operator  
Murphy Operating Corporation

3. Address of Operator  
P. O. Drawer 2648, Roswell, New Mexico 88201

4. Location of Well  
UNIT LETTER E 1920 FEET FROM THE North LINE AND 660 FEET FROM  
THE West LINE, SECTION 23 TOWNSHIP 12 South RANGE 32 East NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)  
4344' DF

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 type="checkbox"/>		COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
OTHER <input type="checkbox"/>		OTHER <u>change status from TA to Flowing</u> <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.

11-15-85 Hot watered flow lines w/35 bbls. F.W. dn. well. Well flowing back. Status change from Temporarily Abandoned to Flowing.

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

SIGNED Lois N. Brown TITLE Production Clerk DATE Dec. 10, 1985

Lois N. Brown  
ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT 1 SUPERVISOR

APPROVED BY JERRY SEXTON TITLE DISTRICT 1 SUPERVISOR DATE DEC 12 1985

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

DEC 11 1985

O.C.D.  
HOBBS OFFICE