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LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
E-473-1	
7. Unit Agreement Name	
Northeast Caprock Queen Unit	
8. Farm or Lease Name	
Northeast Caprock Queen Unit	
9. Well No.	
25	
10. Field and Pool, or Wildcat	
Caprock Queen	
12. County	
Lea	

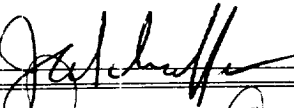
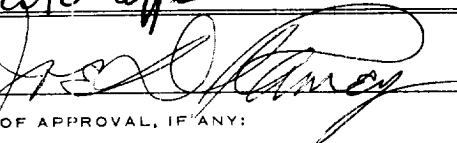
1. <div>OIL WELL <input type="checkbox"/></div> <div>GAS WELL <input type="checkbox"/></div> <div>OTHER- Water Injection</div>	
2. Name of Operator	
TEXACO Inc.	
3. Address of Operator	
P. O. Box 728 - Hobbs, New Mexico 88240	
4. Location of Well	
UNIT LETTER D , 660 FEET FROM THE North LINE AND 660 FEET FROM THE West LINE, SECTION 23 TOWNSHIP 12-S RANGE 32-E NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.)	
4355' (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"/>	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 JOB <input type="checkbox"/>	OTHER Shut well in <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.

Subject well shut in effective 7:00 AM, August 26, 1970.

It is requested that the well be reclassified from its present status to ASD (abandoned - salvage deferred) - Held for abandonment of Unit.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED 	TITLE Assistant District Superintendent	DATE August 26, 1970
APPROVED BY 	TITLE SUPERVISOR DISTRICT	DATE
CONDITIONS OF APPROVAL, IF ANY:		