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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.
B-8631

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
2. Name of Operator	North Caprock Queen Unit No. 2
3. Address of Operator	8. Farm or Lease Name
Anadarko Production Company	Tract No. 27
4. Location of Well	9. Well No.
UNIT LETTER K, 1650 FEET FROM THE South LINE AND 2310 FEET FROM	10. Field and Pool, or Wildcat
THE West LINE, SECTION 11 TOWNSHIP 13 S RANGE 31 E NMPM.	Caprock Queen
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
4422 GL	Chaves

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"/>	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 JOBS <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Convert to water injection
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <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.

Pulled tubing and rods from well, ran sand pump and cleaned out to TD, ran 2" tubing with tension packer set at 3005', connected wellhead for injection and commenced water injection on 9-19-70.

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

SIGNED D. R. Layton TITLE District Superintendent DATE 9-22-70

APPROVED BY [Signature] TITLE [Signature] DATE [Signature]

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

SEP 25 1970

CL. CONSERVATION CLAM.
HARRIS, N. W.