P. O. BOX 1980 CONTACT RETELYING RIH Roswell District UNHOBBS NEW MEXICO 882400FFICE FOR Form 3160-5 (July 1989) (Formerly 9-331) BLR Hodified Form No. DEPARTMENT OF THE INTERIOR (Other hostructions) JIRFD NM. -3160-4 5. LEASE DESIGNATION AND SERIAL NO BUREAU OF LAND MANAGEMENT LC-068474 6. IF INDIAN, ALLOTTEE OR TRIBE HAME 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—" for such proposals.) 7. UNIT AGREEMENT NAME WELL WELL 30-005-00977 Injection NAME OF OPERATOR 3a. Area Code & Phone No. 8. FARM OR LEASE NAME Circle Ridge Production, Inc Drickey Queen Sand Unit 505-393-2727 ADDRESS OF OPERATOR C/O Oil Reports & Gas Services, Box 755, Hobbs, NM 88241 Location or well (Report location clearly and in accordance with any State requirements.* At surface 10. FIELD AND POOL, OR WILDCAT <u>Caprock Queen</u> 11. SEC., T., E., M., OR BLK. AND SURVEY OR ARMA 664.75 FNL & 660' FæL of Sec. 3 Sec. 3, T14S, R31E 15. ELEVATIONS (Show whether DF, RT, OR, etc.) 12. COUNTY OR PARISH | 13. STATE 4308 DF Chaves NM 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF : TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF REPAIRING WELL FRACTURE TREAT MULTIPLE COMPLETE PRACTURE TREATMENT ALTERING CASING SHOOT OR ACIDIZE ABANDON SHOOTING OR ACIDIZING ABANDONMENT* REPAIR WELL CHANGE PLANS (Other) OCD Inspection (Other) (Norg: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) 17. DESCRIBE PROPUSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) 11/20/90 Dug out cellar. Oil Conservation Division representative inspected risers. Inspection O.K. AND MANAGE NOV 3 0 1990 SCONFELL, NEW 18. I hereby certify that the foregoing is true and correct SICNED DATE __11/27/90 (This space for Federal or State office use) ACCEPTED FOR RECORD APPROVED BY

PETER W. CHESTER CONDITIONS OF APPROVAL, IF ANY: DEC 7 1990 *See Instructions on Reverse Side Title 15 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department. BESCHILL BESCHICE OF THEMENT.

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