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TRIBUTION	
FE	
U.S.G.S.	
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 Fee
5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS OF WELL OPERATIONS
DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR TO REWORK EXISTING WELLS.
USE "APPLICATION FOR PERMIT" FORM "C-101" FOR PROPOSALS TO DRILL OR TO DEEPEN OR TO REWORK EXISTING WELLS.

1. OIL WELL GAS WELL OTHER **P & A** **30-005-01045**
 2. Name of Operator **Weldon S. Quest & I. J. Wolfson**
 3. Address of Operator **c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, New Mexico 88240**
 4. Location of Well
 UNIT LETTER **F** **1980** FEET FROM THE **North** **1980** FEET FROM
 THE **West** LINE, SECTION **11** TOWNSHIP **14 S** RANGE **31 E** N.M.P.M.
 7. Unit Agreement Name
 8. Farm or Lease Name **Drickey Queen Sand Unit Tr 47**
 9. Well No. **4**
 10. Field and Pool, or Wildcat **Caprock Queen**
 11. Elevation (Show whether 100' or 1000' datum) **4403 GR**
 12. County **Chaves**

15. Check Appropriate Box To Indicate Nature of Well, or Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
OTHER _____	Re-enter & salvage casing <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, including estimated date of starting any proposed work) SEE RULE 1103.

Subject well was plugged & abandoned 1/2/74 as follows:

Did not shoot, casing backed off at 360'

Spotted 40 sack plug from 270 - 370

Set 10 sack plug at surface with regulation marker

Mud between all plugs

Location has been cleared and levelled, ready for inspection.

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

SIGNED _____ TITLE **Agent** DATE **8/20/74**

APPROVED BY **Nathan E. Clegg** TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: