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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 type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.
7. Unit Agreement Name Drikey Queen Sand Unit
8. Farm or Lease Name Tract 51
9. Well No. 2
10. Field and Pool, or Wildcat Caprock Queen
12. County Chaves

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Water Injection Well
2. Name of Operator Cities Service Oil Co.
3. Address of Operator P.O. 69 - Hobbs, New Mexico
4. Location of Well UNIT LETTER L 2310 FEET FROM THE South LINE AND 330 FEET FROM THE West LINE, SECTION 14 TOWNSHIP 14S RANGE 31E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 4295 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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER Convert to water injection <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.

This well was converted to a water injection well effective 3-15-65 with the following equipment installed:

1. 93 Jts.(2835') 2 3/8" OD 4.7# SR J-55 cement lined tubing set @ 2897.
2. 5 1/2" Udell TCP tension packer set @ 2896.

First water was injected on vacuum @ a rate of 400 B/D on 3-15-65.

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

SIGNED *C. Robertson* TITLE **District Clerk** DATE **3-26-65**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: