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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 Fee

5. State Oil & Gas Lease No.

7. Unit Agreement Name
D.Q.S.U.

8. Farm or Lease Name
Tract 34

9. Well No.
1

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 GAS WELL OTHER

2. Name of Operator
Weldon S. Guest & I. J. Wolfson

3. Address of Operator
Hobbs Pipe & Supply, Box 2010, Hobbs, N. M.

4. Location of Well
UNIT LETTER D 660 FEET FROM THE North LINE AND 660 FEET FROM
THE West LINE, SECTION 16 TOWNSHIP 14S RANGE 31E N.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)
4154' DF

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 checked="" 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 JOBS <input type="checkbox"/>	OTHER <u>Change of location</u> <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.

1. Set CIBP or 25 sx plug to cover existing perforations.
2. Load hole w/mud-laden fluids.
3. Shoot & recover production casing.
4. Spot 100' plug at casing stub.
5. Spot 100' plug in and out of surface casing set @ 191'.
6. Spot 10 sx top hole plug & erect 4" regulation marker.

THE COMMISSION WILL BE OPENED 24 HOURS PRIOR TO THE BEGINNING OF PLANNING OPERATIONS FOR THE CASE TO BE APPROVED.

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

SIGNED S. Sackin TITLE Agent DATE 3/26/74

APPROVED BY Joe D. Ramsey TITLE Dist. L. Supv. DATE 3/26/74

CONDITIONS OF APPROVAL, IF ANY: