| NO. OF COPIES RECEIVED                  |   | Form C-103  |
|---|---|---|
| DISTRIBUTION                            |   | Supersedes <b>Old</b><br>C-102 and C-1 <b>0</b> 3 |
| SANTA FE                                | NEW MEXICO OIL CONSERVATION COMMISSION  | Effective 1-1-65                                  |
| FILE                                    |   |   |
| U.S.G.S.                                |   | 5a. Indicate Type of Lease                        |
| LAND OFFICE                             |   | State KK  |
| OPERATOR                                |   | 5. State Oil & Gas Lease No.                      |
|   |   |   |
| SLINI                                   | DRY NOTICES AND REPORTS ON WELLS  |   |
| (DO NOT USE THIS FORM FOR I             | DRY NOTICES AND REPORTS ON WELLS PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. LATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)  |   |
| 1.                                      |   | 7. Unit Agreement Name                            |
| OIL GAS WELL WELL                       | OTHER-  | Eastcap Queen Pool Un                             |
| 2. Name of Operator                     |   | 8. Farm or Lease Name                             |
| Agua, Inc.                              |   |   |
| 3. Address of Operator                  |   | 9. Well No.                                       |
| Bor #198. Artes                         | ia, New Mexico 88210  | 11  |
| 4. Location of Well                     |   | 10. Field and Pool, or Wildcat                    |
|   | 1650 FEET FROM THE South LINE AND 330 FEET F  | Caprock Queen                                     |
| UNIT LETTER;                            | FEET FROM THE LINE AND FEET F   |   |
| - Mana                                  | TION 27 TOWNSHIP 14 South RANGE 31 Bast NM  |   |
| THE LINE, SEC                           | TION 27 TOWNSHIP 14 SOUTH RANGE 31 BAST NA  | PM. (   |
|   | 15. Elevation (Show whether DF, RT, GR, etc.)   | 12. County  |
|   |   | Chaves  |
| 16. Chaol                               | Appropriate Pay To Indicate Nature of Nation Person   | Other Date  |
|   | k Appropriate Box To Indicate Nature of Notice, Report or   |   |
| NOTICE OF                               | INTENTION TO: SUBSEQUE  | ENT REPORT OF:                                    |
|   |   |   |
| PERFORM REMEDIAL WORK                   | PLUG AND ABANDON REMEDIAL WORK  | ALTERING CASING                                   |
| TEMPORARILY ABANDON                     | COMMENCE DRILLING OPNS.   | PLUG AND ABANDONMENT                              |
| PULL OR ALTER CASING                    | CHANGE PLANS CASING TEST AND CEMENT JOB   | dadaa Yasaabiaa 💖                                 |
|   | other Convert to  | Mater Injection X                                 |
| OTHER                                   |   |   |
| 17. Describe Proposed or Completed      | Operations (Clearly state all pertinent details, and give pertinent dates, included the control of the control | ding estimated date of starting any proposed      |
| work) SEE RULE 1 103.                   |   |   |
|   |   | 0-0-17 1070                                       |
| This we                                 | ell was cleaned out to a depth of 3126' (ground)  | 7. On Oct. 17, 1970,                              |
|   |   | 4 -4 20061 Notes                                  |
| 2-3/8" O.D. cemen                       | t lined tubing was run with a tension packer se   | t at 3000'. Water                                 |
|   | and the second second second was the  | tobing 070 bossels                                |
| injection was com                       | menced on Oct. 17, 1970, below packer. Well is  | taking 9/0 parters                                |
|   | .:  |   |
| per day at 300 ps                       | \$1.•   |   |
|   |   |   |
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|   |   |   |
|   |   |   |
|   |   |   |
| 18. I hereby certify that the informati | ion above is true and complete to the best of my knowledge and belief.  |   |
| 10. Thereby certify that the informat.  | and complete to the best of my knowledge and better.  |   |
|   |   |   |
| SIGNED                                  | TITLE Consulting Engineer.  | DATE Oct. 30, 1970                                |
| N N                                     |   | 4   |
| (1.1)                                   | $\mu^{Q}$   |   |
| APPROVED BY                             | unyan TITLE A CONTRACT  | DATE  |
| CONDITIONS OF APPROVAL, IF A            | NY:   |   |

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