NO. OF COPIES RECEIVED			Form C-103
DISTRIBUTION			Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONS	SERVATION COMMISSION	Effective 1-1-65
FILE			
U.S.G.S.			5a. Indicate Type of Lease
LAND OFFICE			State X Fee
OPERATOR			5. State Oil & Gas Lease No.
SU (DO NOT USE THIS FORM FO USE "APP	NDRY NOTICES AND REPORTS ON PROPOSALS TO DRILL OR TO DEEPEN OF PLUG ILICATION FOR PERMIT - " (FORM C-101) FOR SU	WELLS BACK TO A DIFFERENT RESERVOIR. CH PROPOSALS.)	
I. OIL X GAS WELL OTHER-			7. Unit Agreement Name No. 1
2. Name of Operator			No. Caprock Queen Unit 8. Form or Lease Name
Thunderbird Oil Corporation 3. Address of Operator			No. Caprock Queen Unit
P. O. Box 1778, Midland, Texas 79701			9. Well No.
4. Location of Well			Tract 17, Well No. 3
UNIT LETTER <u>C</u> , 660 FEET FROM THE <u>NORTH</u> LINE AND 1980 FEET FROM			Caprock Queen (Lea)
THE West LINE,	SECTION 6 TOWNSHIP 13-5	S RANGE 32-E NMPM.	
	15. Elevation (Show whether	DF, RT, GR, etc.)	12. County
	4402	2' GL	Lea
16. Che	eck Appropriate Box To Indicate 1	Nature of Notice, Report or Oth	ier Data
	F INTENTION TO:		REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON X	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
		OTHER	
OTHER			
 Describe Proposed or Complet work) SEE RULE 1103. 	ed Operations (Clearly state all pertinent det	ails, and give pertinent dates, including	estimated date of starting any proposed
·			
5-1/2" @ 3000'			
4" Liner @ 2900	-3017'		
	le with $2500\#$ per 100 bbls.	salt base mud.	
2. Set CIBP at approximately 2800'.			
3. Set 35' cement plug (5 sx.) on top of CIBP.			
4. Cut off and pull $5-1/2$ " casing at approximately 1000'.			
5. Spot 35 sx. cement plug in-and-out of 5-1/2" casing stub.			
6. Spot 35 sx. cement plug in-and-out of 8-5/8" casing stub.			
7. Spot 10 sx. cement plug at surface and erect $4\frac{1}{2}$ " regulation dry hole marker.			
8. Clean up location for NMOCC inspection and approval.			
	1001 06	1. 11	
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	/00 1 ph		
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18. I hereby certify that the inform	nation above is true and complete to the best	or my knowledge and belief.	
1	, , , , , , , , , , , , , , , , , , ,	.	.
SIGNED Many f.	Alkross TITLE	President	DATE Feb. 25, 1975
APPROVED BY	TITLE		DATE

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

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