

OIL CONSERVATION DIVISION

P. O. BOX 2083
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1

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SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
OPERATOR	

5c. Indicate Type of Lease
State ☐ Fee ☒
5. State Oil & Gas Lease No.

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name North Caprock Queen Un
2. Name of Operator MURPHY OPERATING CORPORATION	8. Form or Lease Name North Caprock Queen Un Tract #27 #1
3. Address of Operator P. O. Drawer 2648, Roswell, NM 88202-2648	9. Well No. 9
4. Location of Well UNIT LETTER <u>I</u> 1980 FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE, SECTION <u>7</u> TOWNSHIP <u>13 South</u> RANGE <u>32 East</u> NMPM.	10. Field and Pool, or Wildcat Caprock Queen (Lea)
15. Elevation (Show whether DF, RT, GR, etc.) 4383' GL	12. County Lea

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 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 _____		OTHER <u>shut in well</u>	

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 1503.

The subject well has been shut in. The status of this well has changed from producing to shut in.

Expires 6-1-89

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

VIEWED Melinda K. Hickman TITLE Production Supervisor DATE 5/13/88
Melinda K. Hickman

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

MAY 17 1988

RECEIVED

MAY 16 1988

COB
MOBILE OFFICE