State of New Mexico Forgy, Minerals and Natural Resources Departme

Form C-103 Revised 1-1-89

DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION 2040 Pacheco St.

WELL API NO.

Profession of	Santa Fe, NM		30-025-00239	
DISTRICT II P.O. Drawer DD, Arasia, NM 88210	Santa Fe, NM	87505	5. Indicate Type of Lasse ST/	ATE FEE
DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410			6. State Oil & Gas Lease No	
SUNDRY NOTICE	S AND REPORTS ON WELL	LS		
(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.)			7. Lease Name or Unit Agreement Name	
1. Type of Well:			North Caprock Queen	Ont
OF GY?	OTHER			
Name of Operator Injection			8. Well No.	
Sierra Blanca Operating Company			6	
3. Address of Operator			9. Pool name or Wildcat	
802 Turner, Cleburne, Texas 7603)1		Caprock Queen	
Unit Letter F : 1980	Feet From The North	Line and 2043	Feet From The	West Line
Section 7	Township 13S Ran	32E	NMPM	County
	10. Elevation (Show whether I		////	
11. Check Ar	propriate Box to Indicate I		Report or Other Data	
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
NOTICE OF INTE	MITON TO.	30	BSEQUENT REPU	AT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTER	ING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDON			AND ABANDONMENT	
PULL OR ALTER CASING CASING TEST AND CEMENT JOB			_	
OTHER: Mechanical Integrity Test prior to converting to oil OTHER:				
12. Describe Proposed or Completed Operation work) SEE RULE 1103.	ns (Clearly state all pertinent details, an	nd give persinent dates, inc	luding estimated date of starting	any proposed
Requesting a schedule for a mech	anical integrity test in order to c	convert this well to ar	oil producer	
For the week beginning March 15,			p	
			•	

I hereby certify that the information above is this and complete to the best of my knowled Signature.	dge and balief. Agent	3/10/98
Karol Rennels TYPEOR PRINT NAME TYPE OR PRINT NAME	(817) 556-3973	TELEPHONE NO.
(Thus space for State Use) DISTRICT I SUPERVISOR		JUN 29 1998
APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	— TITLE	DATE

