

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
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.
B-6768

7. Unit Agreement Name
Pearsall Queen Sand Unit

8. Farm or Lease Name
Tract No. 13

9. Well No.
1

10. Field and Pool, or Wildcat
Pearsall Queen

12. County
Lea

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
Andaarko Production Company

3. Address of Operator
1014 W. Ave K Lovington, New Mexico

4. Location of Well
UNIT LETTER **P**, **660** FEET FROM THE **East** LINE AND **660** FEET FROM
THE **South** LINE, SECTION **32** TOWNSHIP **17 S** RANGE **32 E** NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
3885 GL

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK

TEMPORARILY ABANDON

PULL OR ALTER CASING

OTHER _____

PLUG AND ABANDON

CHANGE PLANS

SUBSEQUENT REPORT OF:

REMEDIAL WORK

COMMENCE DRILLING OPNS.

CASING TEST AND CEMENT JOB

OTHER _____

ALTERING CASING

PLUG AND ABANDONMENT

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.

Intend to perforate additional Queen sand from 3610-20, 2 holes/ft - Frac well with brine water as follows: Frac present zone with 7500 gal brine and 7500# sand, follow with rock salt slug to bridge present perforations and follow with 500 gal 15% Hcl slug to break down new perforations and follow with frac of 20,000 gal brine and 20,000# sand. Return to production status.

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

SIGNED Ronald R. Sexton TITLE District Superintendent DATE 16 May 1967

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: