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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

JUL 1 1966

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Farm or Lease Name	
E-K Queen Unit Tr. 2	
9. Well No.	
6	
10. Field and Pool, or Wildcat	
E-K Yates 7 Rivers 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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- WIW
2. Name of Operator
Mobil Oil Corporation
3. Address of Operator
P. O. Box #633, Midland, Texas
4. Location of Well
UNIT LETTER K 2310 FEET FROM THE South LINE AND 2310 FEET FROM THE West LINE, SECTION 24 TOWNSHIP 18S RANGE 33E NMPM.

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

12. County
Lea

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/>

Convert to WIW

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.

4403 TD. 5 1/2" csg at 4403. Queen (4341-50, 4380-88).

6/29/66. MIRU Well Service Pulling Unit. Clean out. Pull tubing. Ran Guiberson "Shorty" Tension Pkr on 2-3/8 C. L. tubing (136 jts). Set Pkr at 4268' w/ 14,000# tension. Fiber glass tail pipe at 4300'. Install injection head. Completed as WIW 7/1/66.

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

SIGNED [Signature] TITLE Authorized Agent DATE 7/25/66

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: