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NEW MEXICO OIL CONSERVATION COMMISSION
 HOUSE OFFICE O. G. C.

FEB 17 11 56 AM '67

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

5a. Indicate Type of Lease State <input checked="" 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. 7
9. Well No. Well 2
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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>
2. Name of Operator Mobil Oil Corporation
3. Address of Operator P. O. Box 633, Midland, Texas 79701
4. Location of Well UNIT LETTER <u>D</u> <u>330</u> FEET FROM THE <u>North</u> LINE AND <u>990</u> FEET FROM THE <u>West</u> LINE, SECTION <u>24</u> TOWNSHIP <u>18-S</u> RANGE <u>33-E</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3917 DF

16. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
OTHER <u>Perf Upper Queen & stimulate.</u> <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

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.

TD 4382.

Perf upper Queen Zone and stimulate New Production Zone. Perf from 4315-20' w/2 SPF.
 Treat with 500 Gals. 15% NE acid with suspension agent followed with 20000 gals.
 gelled brine water + 20000# 20/40 SD + 10/20 sd.

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

SIGNED John J. Hurd TITLE Authorized Agent DATE 2/15/67
 APPROVED BY _____ TITLE _____ DATE _____
 CONDITIONS OF APPROVAL, IF ANY: