to Appropriate District Office	Energy, Minerals and Natural Resources Department		Revised 1-1-89	
DISTRICT I	c 1980, Hobbs, NM 88240 310 Old Santa Fe Trail, Room 206 TTI Santa Fe, New Mexico 87503 wer DD, Antesis, NM 88210 Santa Fe, New Mexico 87503		WELL API NO.	
P.O. Box 1980, Hobbs, NM 88240			30-025-02340	
DISIRICT II P.O. Drawer DD, Artesia, NM 88210			5. Indicate Type of Lease f-ederal STATE FEE	
DISTRICT III 1000 Rio Brazos R.d., Aziec, NM 87410			6. State Oil & Gas Lease No.	
SUNDRY NO				
(DO NOT USE THIS FORM FOR PF DIFFERENT RESE (FORM (7. Lesse Name & Unit Agreement Name			
1. Type of Well: OIL OTHER WIW			EK Queen Unit	
2. Name of Operator			8. Well No.	
Seely Oil Company			41	
3. Address of Operator			9. Pool name or Wildcat	
815 W. 10th St., Fort Worth, Tx. 76102			EK-Yates-SR-Queen	
4. Well Location				
Unit LetterE :19	180 Feel From The North	Line and 66	0 Feet From The West Line	
Section 18			NMPM Lea County	
	10. Elevation (Show whether 3943 GL			
11. Check	Appropriate Box to Indicate 1	Nature of Notice, Re	eport, or Other Data	
NOTICE OF INTENTION TO: SUB			SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK		REMEDIAL WORK	XX ALTERING CASING	
	CHANGE PLANS	COMMENCE DRILLING OPNS.		
PULL OR ALTER CASING		CASING TEST AND CEN	JENT JOB	
OTHER:		OTHER:		
12. Describe Proposed or Completed Open	ations (Clearly state all pertinent details, o	and give pertinent dates, inclu	ding estimated date of starting any proposed	

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any propose work) SEE RULE 1103.

The previously installed cement lined tbg. and pkr. were removed. A plastic lined AD-1 pkr. was run on 140 jts. 2-3/8" EUE Salta-lined tbg. Pkr. was set @ 4288'. The csg/tbg annulus was tested to 300 psi with no bleed-off. (Test was witnessed by Mr. Rodriguez of the New Mexico PCD, Hobbs office).

Permission is hereby requested to resume water injection into the Queen formation in this well.

I hereby certify that the inform	mation above is true and complete to the best of my kno in I A A A A A A A A A A A A A A A A A A	wedge und belief.	DATE9/14/99
TYPE OR PRINT NAME	David L. Henderson	TELETIONE NO.	817/332-1377
(This space for State Use)	OF GUVAL STATEO BY		SEP 2 1 1999
AFTROVED BY		TTTLP:	DATI!

CONDITIONS OF APPROVAL, IF ANY:



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