

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO. 30-025-29454
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. OG-2414
7. Lease Name or Unit Agreement Name Central EK Queen Unit
8. Well No. 31
9. Pool name or Wildcat EK-Yates-SR-Queen

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. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Water Injection	
2. Name of Operator Seely Oil Company	
3. Address of Operator 815 W. 10th St., Fort Worth, Texas 76102	
4. Well Location Unit Letter <u>E</u> : <u>2310</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u> Line Section <u>7</u> Township <u>18S</u> Range <u>34E</u> NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4104' RKB	

11. 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"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <u>Convert to Water Injection</u> <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

12. 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.

Seely Oil Company proposes to convert the CEKQU #31 well to water injection for the purpose of secondary recovery as set out in OCD Case No. 10648 and waterflood Order No. R-9885-A.

A plastic coated packer and Salta lined tubing will be run and the packer will be set less than 100' above the top of the injection interval of 4360-65'. The annulus will be filled with packer fluid.

After setting the packer, the tubing/casing annulus will be tested per OCD specifications and a chart will be forwarded to the District Office in Hobbs.

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

SIGNATURE David L. Henderson TITLE Petroleum Engineer DATE 8/11/99
TYPE OR PRINT NAME David L. Henderson TELEPHONE NO. 817/332-1377

(This space for State Use)

ORIGINAL SIGNED BY
GARY WINK
FIELD REP. II

APPROVED BY _____ TITLE _____ DATE OCT 15 1999

CONDITIONS OF APPROVAL, IF ANY:

TC

After 2008
start here
to enter in

ONCARD

* change

of name *
effective?
J