

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

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  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.

30-025-30722

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B 959

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 ☒

GAS

WELL ☐

OTHER

2. Name of Operator

Questa Oil & Gas Co.

3. Address of Operator

7030 S. Yale, Ste. 406, Tulsa, OK 74136

4. Well Location

Unit Letter P : 875 Feet From The East Line and 330 Feet From The south Line

Section

13

Township

17 south

Range

34 east

NMPM

Lea

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

GR 4003'

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☒

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☒

OTHER: ☐

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.

Spudded at 7:00 p.m., 10/30/89. On 11/2/89 ran 40 jts. 8 5/8" casing, set at 1704' KB (2 jts. 24 lb. on bottom; 34 jts. 23 lb. in middle; 4 jts. 24 lb. on top). Ran guide shoe, insert float and 14 centralizers. Dowell cemented with 600 sx 65-35 C Poz With 6% jel, 1/4 lbs. per sac celloflakes & 2% cc + 200 sx Class C with 1/4 lbs. per sac celloflakes & 2% cc. Top of cement at surface, circulated 50 sx. Tested 8 5/8" casing & BOP to 1000 psi for 30 min. Held OK.

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

SIGNATURE

*Connie Vinyard*

TITLE

Well Operations

DATE

11/2/89

TYPE OR PRINT NAME

Connie Vinyard

TELEPHONE NO. 918/494-6055

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

NOV 6 1989

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: