

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources
OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

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.)		WELL API NO. 30-025-00862
1. Type of Well: Oil Well Gas Well Other INJECTION		5. Indicate Type of Lease FEDERAL STATE <input type="checkbox"/> FEE
2. Name of Operator Sierra Blanca Operating Co.		6. State Oil & Gas Lease No. NMCLO64175-A
3. Address of Operator 1111 N. Washington Roswell, New Mexico 88201		7. Lease Name or Unit Agreement Name: Young Queen Federal Unit
4. Well Location Unit Letter B 990 feet from the North line and 2310 feet from the East line Section 20 Township 18S Range 32E NMPM County Lea		8. Well No. 014
10. Elevation (Show whether DR, RKB, RT, GR, etc.)		

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AND CEMENT JOB	
OTHER: Return to production		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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

Install producing equipment and test well.

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

SIGNATURE Clyde A. Liley TITLE President DATE _____

Type or print name Clyde A. Liley Telephone No. (505) 622-8528

(This space for State use)

APPROVED BY _____ TITLE _____ DATE _____
Conditions of approval, if any: