	* a		e	Form C-103
Submit 3 Copies To Appropriate District Office	State of New Mexico		Revised March 25, 1999	
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		WELL API NO.	
District II				5-08072
811 South First, Artesia, NM 88210 District III 2040 South Pacheco		1	5. Indicate Type of	-
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe NM 87505			STATE STATE	
<u>District IV</u> 2040 South Pacheco, Santa Fe, NM 87505	,		6. State Oil & Gas	C064175-A
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			Name:	- F 1 177 '4
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		Socii	Young Quee	n Federa l Unit
1. Type of Well:	Other			
Oil Well Gas Well	Other		8. Well No. 007	
2. Name of Operator Sterra Dianou Operating Co.				
3. Address of Operator 1111 N. Washington			8. Pool name or \	
Roswell, New Mexico 88201			Y our	ng Queen
4. Well Location				
T	1980feet from theNor	th line and	660 feet from	m the West line
Unit Letter <u>E</u> :	1980 leet from the 1981			
Section 16	Township 18S	Range 32F		County Lea
10. Elevation (Show whether DR, RKB, RT, GR, etc.)				
11 Chack As	opropriate Box to Indicate Na	ature of Notice, I	Report or Other I)ata
NOTICE OF IN	FENTION TO:	SUB	SEQUENT REP	ORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WOR	K	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRI	LLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE		CASING TEST AND	
1 022 01112	COMPLETION	CEMENT JOB		
OTHER: Peture to production				
OTHER: Return to production 12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date pertinent details, and give pertinent dates, including estimated date pertinent details, and give pertinent dates, including estimated date pertinent dates, including estimated dates.				
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach welloofe diagram of proposed completions.				
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.				
\bigcirc	J. L. VIIILE			DATE
SIGNATURE VILLE	1. Very	,1103141		
Type or print name	Clyde A. Liley	Telep	hone No. (505) 622	2-8528
(This space for State use)			ing in isy	WANT OF T

APPPROVED BY ______. Conditions of approval, if any: