

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

OIL CONSERVATION DIVISION  
P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088

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

|                                                                                                     |
|-----------------------------------------------------------------------------------------------------|
| WELL API NO.                                                                                        |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.<br>A-4096                                                              |
| 7. Lease Name or Unit Agreement Name<br>"DD QUEEN STATE #4"                                         |
| 8. Well No.<br>4                                                                                    |
| 9. Pool name or Wildcat<br>SCHARB 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:<br>OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | 2. Name of Operator<br>JFG ENTERPRISE                                                                                                                  |
| 3. Address of Operator<br>P.O. Box 100, ARTESIA, New Mexico 88210                                                                 | 4. Well Location<br>Unit Letter K : 2080 Feet From The SOUTH Line and 1980 Feet From The WEST Line<br>Section 4 Township 19S Range 35E NMPM LEA County |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.)<br>3907                                                                        |                                                                                                                                                        |

|                                                                               |                                                                    |
|-------------------------------------------------------------------------------|--------------------------------------------------------------------|
| 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: <input type="checkbox"/>                                               | PLUG AND ABANDONMENT <input type="checkbox"/>                      |
|                                                                               | CASING TEST AND CEMENT JOB <input type="checkbox"/>                |
|                                                                               | OTHER: Plug Back & Re complete <input checked="" 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.

1. CHANGED WELL NAME FROM "NEW MEXICO DD STATE #4" TO "DD QUEEN STATE #4"
2. PLUGGED BACK FROM 9509 TO 4965<sup>FT</sup> WITH BRIDGE PLUG TUBING TALLY MEASURE.
3. PERFORATE 4670' TO 4678' WITH HLC CASING GUN - 19 HOLES .41 hole. + SPOT 100 GAL ACID ACROSS PERF.
4. RAN TUBING + PACKER; SET PACKER @ 4578 + ACIDIZE WITH 1500 GAL 15% NEFE HUGHES SERVICE ACID. BROKE AT 2370 PSI. TREAT AT 4.8 BPM AT 1625. 151. 1100. Bled TO 150 PSI IN 5 MIN.
6. SWAB BACK - LAST RUN 50% OIL + 50% WTR FLUID AT 2600' WILL PLACE ON PUMPING UNIT.

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

SIGNATURE JAMES E. GUY TITLE PARTNER DATE FEB 14, 1991

TYPE OR PRINT NAME JAMES E. GUY TELEPHONE NO. 746-9811

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: