Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office Energy, Minerals and Natural Resources Revised March 25, 1999 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 District II OIL CONSERVATION DIVISION 30-025-28013 811 South First, Artesia, NM 87210 5. Indicate Type of Lease 2040 South Pacheco District III 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 STATE  $\square$ FEE x District IV 6. State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (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.) Humphrey Queen Unit 1. Type of Well: Oil Well Gas Well G Other Water Injection Well 2. Name of Operator 8. Well No. Prize Operating Company 3. Address of Operator 9. Pool name or Wildcat 3500 William D. Tate, Suite 200, Grapevine, Texas 76051 Langlie Mattix 7Rvrs-Queen-Grayburg 4. Well Location 1300 feet from the South. line and 1750 \_\_ feet from the West line Section Township 25S Range **NMPM** 37E County Lea 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3140' GR 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 X ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT PULL OR ALTER CASING MULTIPLE CASING TEST AND COMPLETION CEMENT JOB OTHER: 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. 4-20-2001 Pulled tubing and packer. Found hole in 6th joint from surface. 4-23-2001 Ran bit and scraper. Cleaned out. 4-24-2001 Ran injection tubing and packer while testing tubing in the hole. 4-25-2001 Set packer @ 3305'. Pressure tested casing to 380 #. Dropped to 360# and held for 45 minutes. I hereby certify that the information above is true and complete to the best of my knowledge and belief. **SIGNATURE** TITLE Regulatory Analyst Type or print name Don Aldridge Telephone No.

TITLE

(This space for State use)

Conditions of approval, if any:

APPROVED BY\_