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- 30297 ✓

5. Indicate Type of Lease STATE [X] FEE [ ]

6. State Oil & Gas Lease No. B-9311

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.)

7. Lease Name or Unit Agreement Name: West Dollarhide Queen Sand Unit

1. Type of Well: OIL WELL [ ] GAS WELL [ ] OTHER WIW

2. Name of Operator: Sirgo Operating, Inc.

8. Well No. 140

3. Address of Operator: PO Box 3531, Midland, TX 79702

9. Pool name or Wildcat: Dollarhide Queen

4. Well Location
Unit Letter K : 2150 Feet From The South Line and 1425 Feet From The West Line
Section 32 Township 24S Range 38E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3157' 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 [ ]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]	CHANGE PLANS [ ]	COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]		CASING TEST AND CEMENT JOB [ ]	
OTHER: [ ]		OTHER: Pressure Test [X]	

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.

11-18-92 MI & RU PU. Unset pkr. Tag 5' fill. POH w/tbg & pkr.

Tally & test in hole w/ IPC tbg & pkr. Circ 100 bbls 2% KCL w/100 Omega pkr fluid. Set & test csg/pkr 330# for 15 min. Tested okay. RD & MO. Clean location.

Chart attached.

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

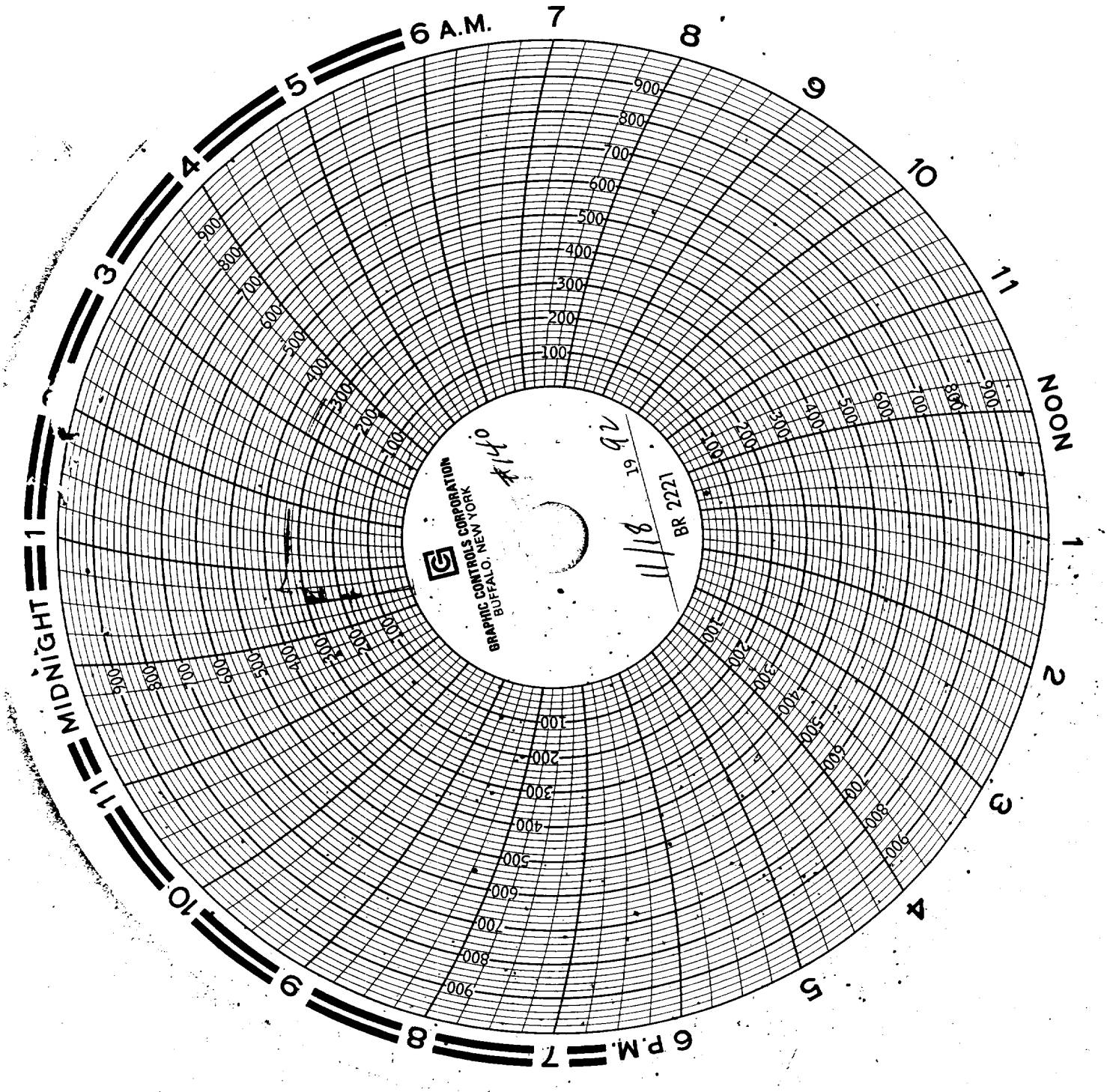
SIGNATURE [signature] TITLE Vice-President DATE 1-15-93

TYPE OR PRINT NAME Victor J. Sirgo TELEPHONE NO. 915/685-0878

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE JAN 20 1993

CONDITIONS OF APPROVAL, IF ANY: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