

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.	30-045-25997	
5. Indicate Type of Lease	STATE ☐	FEE ☒
6. State Oil & Gas Lease No.		

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: OIL WELL ☐ GAS WELL ☒ OTHER	7. Lease Name or Unit Agreement Name Bruce R. Sullivan		
2. Name of Operator Amoco Production Company	8. Well No. 2		
3. Address of Operator 200 Amoco Court Farmington NM	9. Pool name or Wildcat Chacra, CT&CO		
4. Well Location Unit Corner J : 1700 Feet From The S Line and 1480 Feet From The E Line Section 23 Township 28N Range 10W NMPM SAN JUAN County			
10. Elevation (Show whether DF, 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 ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: Flow Test for Evaluation ☒	PLUG AND ABANDONMENT ☐
	CASING TEST AND CEMENT JOB ☐
	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.

Amoco hereby requests approval to flow test and
place the subject well for 7 to 10 days to
determine economics for pipeline connection.

RECEIVED

OCT 10 1990

OIL CON. DIV.

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

SIGNATURE BS Shaw TITLE Enviro. Coordinator DATE 10/8/90
TYPE OR PRINT NAME TELEPHONE NO.

(This space for State Use)

APPROVED BY Original Signed by FRANK T. CHAVEZ TITLE SUPERVISOR DISTRICT # 3 DATE OCT 12 1990
CONDITIONS OF APPROVAL, IF ANY: