

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

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.

30-045-21103

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.)

7. Lease Name or Unit Agreement Name

Lobato Gas Com /H/

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☒

OTHER

2. Name of Operator

Attention:

Amoco Production Company

E. W. Baker

8. Well No.

1

3. Address of Operator

P.O. Box 800

Denver

Colorado

80201

(303) 830-4784

9. Pool name or Wildcat

Blanco Pictured Cliffs

4. Well Location

Unit Letter L : 1120 Feet From The West Line and 1630 Feet From The South Line

Section

3

Township

29N

Range

9W

NMPM

San Juan

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

5639' GR

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: Please See Below. ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

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.

This well was previously shut in; Amoco has restored production effective 4/14/94.

RECEIVED
APR 25 1994
OIL CON. DIV.
DIST. 3

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

SIGNATURE

E. W. Baker

TITLE

Staff Support

DATE 04-22-1994

TYPE OR PRINT NAME

E. W. Baker

TELEPHONE NO.

(This space for State Use)

APPROVED BY

Original Signed by CHARLES GHOLSON

TITLE

DEPUTY OIL & GAS INSPECTOR, DIST. 3

DATE

APR 25 1994

CONDITIONS OF APPROVAL, IF ANY: