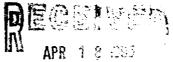
State of New Mexico Form C-103 Energy, Minerals and Natural Resources Department Revised 1-1-89 District Office OIL CONSERVATION DIVISION DISTRICT 1 WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O.Box 2088 3004524952 Santa Fe, New Mexico 87504-2088 DISTRICT II 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 FEE X STATE \square DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 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 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Valencia Gas Com "B" 1. Type of Well: OIL WELL **OTHER** 8. Well No. Attention: 2. Name of Operator 1 M Lois Raeburn **Amoco Production Company** 3. Address of Operator 9. Pool name or Wildcat Colorado 80201 Basin Dak / Blanco MV P.O. Box 800 Denver 4. Well Location South 1560' West Line 1670 Feet From The Line and Feet From The Unit Letter San Juan 9W County 29 N NMPM 18 Township Range Section 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 5537' Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. SUBSEQUENT REPORT OF: **NOTICE OF INTENTION TO: ALTERING CASING** PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK PLUG AND ABANDONMENT COMMENCE DRILLING OPNS. x **TEMPORARILY ABANDON** CHANGE PLANS CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** BRADENHEAD REPAIR Correction CANCEL 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. Bradenhead Repair filed 3/12/93 has the wrong location and API #. API should be: 3004524952, Location is Sec. 18 T 29 N R 9 W Unit K 1670 FSL 1560' FWL. For the Valencia Gas Com "B" 1M Orginally filed as API 3004508230. Location Sec 18 T 29 N R 9 W Unit O 940' FSL 1670' FEL For the Valencia Gas Com "B" 1 Bradenhead filed 3 - 12 - 93 CANCEL If you have any questions please contact Lois Raeburn.



	tion above is true and complete to the	best of my knowledge and belief. Business Assistant TITLE DATE
TYPE OR PRINT NAME	Lois Raeburn	TELEPHONE NO. (303) 830-5294

(This space for State Use)

my Robinson

DEPUTY OIL & GAS INSPECTOR, DIST. # ... DATE

APR 1 8 1995