

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>	
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Farm or Lease Name Nye Gas Com	
9. Well No. 1A	
10. Field and Pool, or Wildcat Blanco Mesaverde	
12. County San Juan	

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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER-
2. Name of Operator Amoco Production Company
3. Address of Operator 501 Airport Drive, Farmington, Nm 87401
4. Location of Well UNIT LETTER <u>F</u> , <u>2225</u> FEET FROM THE <u>North</u> LINE AND <u>950</u> FEET FROM THE <u>West</u> LINE, SECTION <u>7</u> TOWNSHIP <u>29N</u> RANGE <u>9W</u> NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)  
5624' G.L.

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <u>Correction to Ground Level Elevation</u> <input checked="" type="checkbox"/>

17. 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.

The correct Ground Level elevation should be 5624' and not 5629' as reported previously.



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

SIGNED Original Signed By TITLE Dist. Admin. Supvr. DATE FEB 9 1982

APPROVED BY Original Signed by FRANK T. CHAVEZ SUPERVISOR DISTRICT 3 DATE FEB 11 1982

CONDITIONS OF APPROVAL, IF ANY: