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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State Fee XX

5. 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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- _____	7. Unit Agreement Name San Juan 30-5 Unit
2. Name of Operator Northwest Pipeline Corporation	8. Farm or Lease Name San Juan 30-5 Unit Com
3. Address of Operator P.O. Box 90, Farmington, New Mexico 87499	9. Well No. #103
4. Location of Well UNIT LETTER <u>M</u> <u>1090</u> FEET FROM THE <u>South</u> LINE AND <u>920</u> FEET FROM THE <u>West</u> LINE, SECTION <u>3</u> TOWNSHIP <u>30N</u> RANGE <u>5W</u> NMPM.	10. Field and Pool, or Wildcat Basin Dakota
15. Elevation (Show whether DF, RT, GR, etc.) 6409 GR	12. County Rio Arriba

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER _____ <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER <u>Extension of APD</u> <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> _____ <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input 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 1503.

We would like to request an extension of the APD as we do plan to drill this well in June of 1984.

4/100.17, 1984

APR 26 1984

OIL CON. DIV.
DIST. 3

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

SIGNED B Linda Marques TITLE Clerk DATE 4-25-84

Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT # 3

DATE APR 26 1984

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: