NO. OF COPIES RECEIVED	3				Form C-103	014	
DISTRIBUTION	<u>                                     </u>	ı			Supersedes ( C-102 and C		
SANTAFE	+	NEW ME	EXICO OIL CONS	SERVATION COMMISSION	Effective 1-1	-65	
FILE	1/1/4				5a. Indicate Typ	e of Lease	
U.S.G.S.	1——				State State	Fee XX	
LAND OFFICE	1,1-1	1			5. State Oil & G		
OPERATOR	$\perp \downarrow$	ļ			o. state on a c	as Lease No.	
	SUNDR	Y NOTICES AND	REPORTS ON	I WFI I S	illillilli.		
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. Unit Agreement Name	
	r XX	OTHER-					
2. Name of Operator  AMOCO PRODUCTION COMPANY						8. Form or Lease Name Martinez Gas Com "F"	
3. Address of Operator						9. Well No.	
501 Airport Drive, Farmington, New Mexico 87401						1E	
4. Location of Well						10. Field and Pool, or Wildcat	
UNIT LETTER P 805 FEET FROM THE SOUTH LINE AND 1035 FEET FROM						Basin Dakota	
THE East LINE, SECTION 24 TOWNSHIP 29N RANGE 10W NMPM.							
mmmm	TITI)	15. Eleve	ntion (Show whethe	r DF, RT, GR, etc.)	12. County	,,,,,,,,,,,,,	
	111111			5525 GL	San Juan		
16.	Check	Appropriate Box	CTo Indicate	Nature of Notice, Report	or Other Data		
NOTI		NTENTION TO:		<del>-</del>	UENT REPORT OF	` <b>:</b>	
_	_			,	1		
PERFORM REMEDIAL WORK	ᆗ	PLU	G AND ABANDON	REMEDIAL WORK	==	RING CASING	
TEMPORARILY ABANDON	┥		NCE BLANS XX	COMMENCE DRILLING OPNS.	PLUG	AND ABANDONMENT	
PULL OR ALTER CASING	_	CHA	NGE PLANS	CV2116 1521 VIII 55111 345 C			
				OTHER	<del></del>		
OTHER	···············			1			
		perations (Clearly st	ate all pertinent de	etails, and give pertinent dates, in	cluding estimated date o	starting any proposed	
work) SEE RULE 1103.							
					,		
This is	to rec	quest an exte	ension of ap	proval for drilling,	as the approve	al expires	
August	27, 197	79. Our plar	is call for	drilling this well i	n the near fut	ire.	
J	-				u = -	~~	
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			APPLOS	Atomic Salar		3	
	FOR 90 DAYN OF AND Parillance Company						
						s. 'A /	
			novi i	2 4 5 7 B	A STANDER	and the same of th	
		E	XPIRESNOV.	Z 2 (0 )*	The same of the sa	4.5. M. W. Fred & C. W.	
10 Thereby newtifu that the	information	n above is true and c	omplete to the bes	t of my knowledge and belief.			
Odelinal Signal	ned By	is true and e					
r r 5VOB	ODA			Dist. Adm. Supervis	or A	ug. 17, 1979	
51GNED		vdrick	TITLE	DIST. Adm. Supervis	OF DATE B	<u>une -19 1010</u>	
riginal Signs	ed by A.	R. ACHAL		SUPERVISOR DISTRICT # 3			
181mar ==0			T1T1 E	######################################	DATE AU	6 2 0 <b>197</b> 9	
	_		TITLE				

CONDITIONS OF APPROVAL, IF ANY: