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LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-55

5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.
7. Unit Agreement Name Callegos Canyon Unit
8. Farm or Lease Name
9. Well No. 173E
10. Field and Pool, or Wildcat Basin Dakota
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 ☒ GAS WELL ☐ OTHER-

2. Name of Operator
Amoco Production Company

3. Address of Operator
501 Airport Drive, Farmington, NM 87401

4. Location of Well
UNIT LETTER E 1925 FEET FROM THE North LINE AND 635 FEET FROM
THE West LINE, SECTION 29 TOWNSHIP 29N RANGE 12W NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
5303' GL

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"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOBS <input type="checkbox"/> OTHER <input type="checkbox"/>
	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> Completion <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.

Completion operations commenced on 8-8-80. Total depth of the well is 6000' and plug back depth is 5968'. Perforated intervals 5834-5858' with 2 SPF, a total of 48, .5" holes. Blew well dry with air and put on flow test. Released the rig on 8-11-80.



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

Original Signed By
E. E. SVOBODA

TITLE Dist. Adm. Supvr.

DATE 9-5-80

Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT # 3

SEP 8 1980

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY: