ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA FE			
FILE			
U.\$.G.\$.			
LAND OFFICE	L		
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OIL CONSERVATION DIVISION

ue. er cerice acceives	-	P. O. BOX 2088	Form C-103 Revised 19-1-78
DISTRIBUTION	-		KeAized 13-1-10
SANTA FE	SANTA	FE, NEW MEXICO 87501	
FILE	4		5a. Indicate Type of Lease
U.\$.G.\$.	4		State Fee X
LAND OFFICE	4		5. State Oil & Gas Lease No.
OPERATOR			
			mmmmm
SUNDE	RY NOTICES AND REF	PORTS ON WELLS PEN ON PLUG BACK TO A DIFFERENT RESERVOIR1011 FOR SUCH PROPOSALS.	
(DO NOT USE THIS FORM FOR PR	OPOSALS TO DRILL OR TO DEEP	PEN OR PLUG BACK TO A DIFFERENT RESERVOIR. -101) FOR SUCH PROPOSALS.}	
USE ANNEXES			7. Unit Agreement Name
OIL X WELL WELL	OTHER-		E. Farm or Lease Name
, Name of Operator			Earl B. Sullivan
Amoco Production Compa	.ny		9. Well No.
. Address of Operator			
501 Airport Drive, Far	mington. New Mexi	.co 87401	3
			10. Field and Pool, or Wildcat
. Location of Well	. =	510	Undesignated Gallup
L	1700 FEET FROM THE .	South LINE AND 510 FEET FROM	
			Allillillilli
Was t	25	11P 29N RANGE 11W NMPM	
THEWESLLINE, SECT	10H TOWNSH	IPRANGENMPM	VIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII
	· · · · · · · · · · · · · · · · · · ·	Show whether DF, RT, GR, etc.)	12. County
	15. Elevation (3		
		5600'GR	San Juan
6. Ch - ale	A Por To	Indicate Nature of Notice, Report or Ot	her Data
		indicate Nature of Notice, Report of or	T REPORT OF:
NOTICE OF 1	NTENTION TO:	SUBSEQUEN	I REPORT OF:
		_ _	۲-
PERFORM REMEDIAL WORK	PLUG AND	ABANDON REMEDIAL WORK	ALTERING CASING
$\overline{}$		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
TEMPORARILY ABANDON			
PULL OR ALTER CASING	CHANGE PL	ANS CASING TEST AND CEMENT 340	
- 15:11:	Dammit	OTHER	
Extend Drilli	ing remit		
			any proposed
7. Describe Proposed or Completed C	perations (Clearly state all	pertinent details, and give pertinent dates, including	g estimated date of starting any property
work) SEE RULE 1103.			
Amoco Production Compa	any requests appro	oval of an extension of our dril	ling permit that was
originally approved or		- · · · - · · · · · · · · · · · · · · ·	28 1
originally approved or	1 0-9-03.	•	
	•	- years	
	June 9/184		
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	111191910811		
	776/66 1/1764	- 0	
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B. I hereby certify that the information	on above is true and complet	e to the best of my knowledge and belief.	
a Dv			
-		Dist Adm Cunormicor	12-16-83
SIGNEDSI	<i>ــــــ</i>	TITLE Dist.Adm. Supervisor	
	<u> </u>		
	RAVEZ	****	DATE