Submit 3 Copies to Appropriate District Office

State of New Mexico

Form C-103

Energy, Minerals and Natural Resources Revised 1-1-89 OIL CONSERVATION DIVISION **DISTRICT** I WELL API NO. P.O. Box 1980, Hobbs, NM 88240 P.O.Box 2088 3004525840 **DISTRICT II** Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 FEE X **DISTRICT III** STATE 1000 Rio Brazos Rd., Aztec, NM 87410 6. 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 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) **GALLEGOS CANYON UNIT** 1. Type of Well: OIL WELL X OTHER 2. Name of Operator 8. Well No. Attention AMOCO PRODUCTION COMPANY Nancy I. Whitaker # 331 9. Pool name or Wildcat P.O. Box 800 Denver Colorado 80201 303-830-5039 Pinion Fruitland Sand/W. Kutz Pictured Cliffs 4. Well Location 1875 640 Ε NORTH WEST Unit Letter Feet From The Line and Feet From The Line 29 29N 12W Section SAN JUAN Township Range **NMPM** County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 5305 GL 11. Check Appropriate Box to Indicate Nature of Notice Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT **PULL OR ALTER CASING** CASING TEST AND CEMENT JOB DHC #1407 OTHER: OTHER: 12. 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. MIRUSU 4/15/97 TOH W/ 1" TBG LAYING DOWN. MILLED OUT STUCK SEAL ASSEMBLY FROM PKR AND FISHED OUT PACKER. TIH TAGGED FILL AT 1250', CLEAN OUT 60' FILL WITH AIR TO 1310'. TIH W/ 2 3/8" TBG AND LANDED AT 1208' SWABBED WELL 24 HRS. ON 1/4" CHOKE. RECOVERED 103 BBLS WATER, 150 MCF GAS. RDSUMO 4/24/97

I hereby certify that the information above is true and complete to the best of my knowledge and belief. Staff Assistant 05-01-1997 SIGNATURE TITLE Nancy I. Whitaker TYPE OR PRINT NAME TELEPHONE NO. 303-830-5039

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CONDITIONS OF APPROVAL, IF ANY