

Submit 3 Copies

to Appropriate

District Office

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico

Energy, Minerals and Natural Resources Department

Form C-103

Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO.

30-045-13120

5. Indicate Type of Lease

STATE ☐

FEE ☒

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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL

☐

GAS

WELL ☒

OTHER

2. Name of Operator

Attention:

Amoco Production Company

Patty Haeefe

8. Well No.

1

3. Address of Operator

P.O. Box 800

Denver

Colorado

80201

(303) 830-4988

9. Pool name or Wildcat

Fulcher Kutz Pictured Cliffs

4. Well Location

Unit Letter P : 1190 Feet From The South Line and 800 Feet From The East Line

Section

27

Township

30N

Range

12W

NMPM

San Juan

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

5617 GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

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.

Amoco Production Company intends to repair the subject well per the attached procedure:

RECEIVED
MAR - 7 1995
OIL CON. DIV.
DIST. 3

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

SIGNATURE

Patty Haeefe

TITLE

Staff Assistant

DATE 03-06-1995

TYPE OR PRINT NAME

Patty Haeefe

TELEPHONE NO. (303) 830-4988

(This space for State Use)

APPROVED BY

ORIGINAL SIGNED BY ERNIE BUSH

TITLE

DEPUTY OIL & GAS INSPECTOR, DIST. #2

DATE

MAR 10 1995

CONDITIONS OF APPROVAL, IF ANY:

WORKOVER PROCEDURE

1. MIRUSU. Record TP, CP, BHP.
2. ND wellhead, NU BOP's.
3. RIH and tag for fill. PBTD is 1950'. POH with 2 3/8" TBG.
4. RIH and set CIBP at 1810' in attempt to shut-off water.
5. RIH with 2 3/8" TBG and land at 1780'.
6. ND BOP's, NU wellhead.
7. RDMOSU and return well to flow test.

Sheet I
J Box 1980, Hobbs, NM 88241-1980
Sheet II
J Drawer DD, Artesia, NM 88211-0719
Sheet III
300 N. Alameda Rd., Aztec, NM 87410
Sheet IV
J Box 1088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-102
Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

APL Number 30-045-13120		Pool Code 77200		Pool Name Fulcher Kutz Pictured Cliffs Ext.	
Property Code		Property Name Duff Gas Com /B/			Well Number 1
OGRID No. 000778		Operator Name Amoco Production Company			Elevation 5617'

10 Surface Location

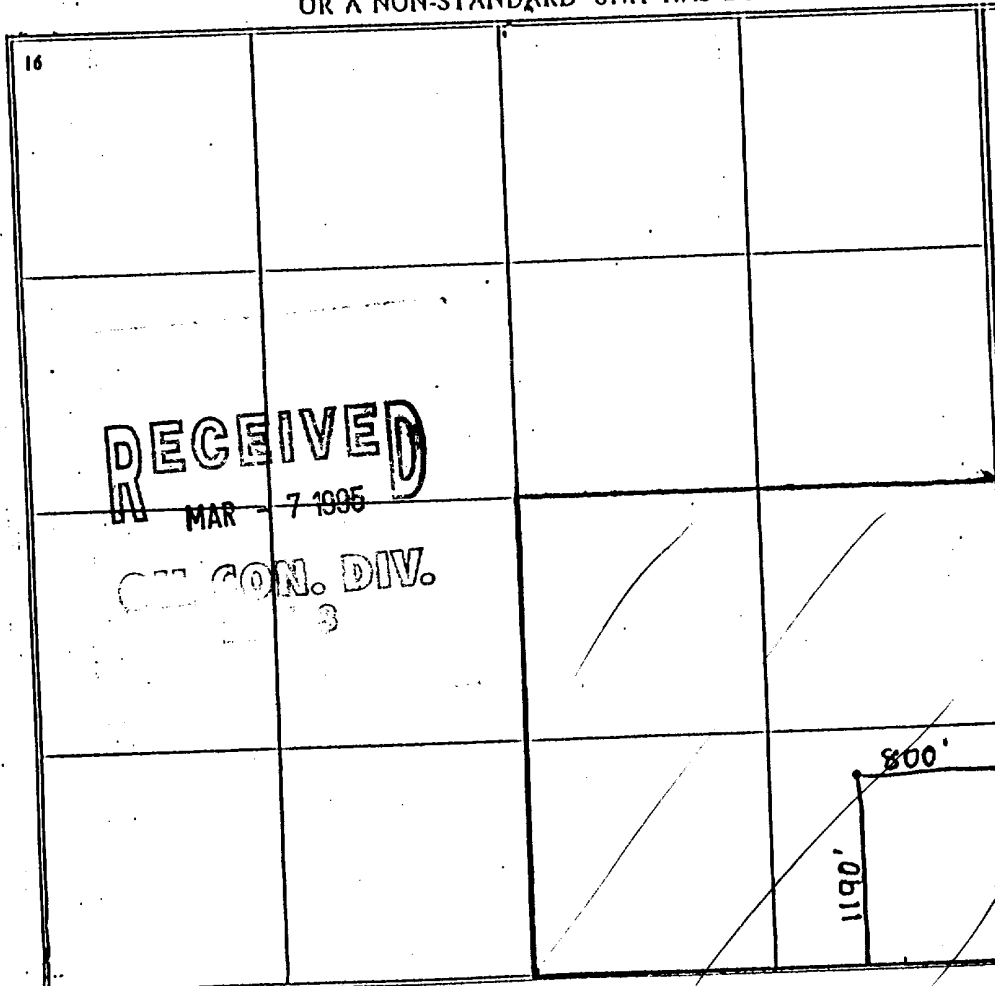
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	27	30N	12W	P	1190	South	800	East	San Juan

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

12 Dedicated Acres 160	13 Joint or Infill	14 Consolidation Code	15 Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



17 OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief

Patty Haefele
Signature

Patty Haefele
Printed Name

Business Associate
Title

1-26-95
Date

18 SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

1-6-62
Date of Survey

Signature and Seal of Professional Surveyor:

1463
Certificate Number