

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. 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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- <input type="checkbox"/>		7. Unit Agreement Name	
2. Name of Operator Joel B. Burr, Jr.		8. Farm or Lease Name Amoco	
3. Address of Operator Suite 300, 300 W. Arrington, Farmington, NM 87401		9. Well No. 1	
4. Location of Well UNIT LETTER <u>A</u> <u>810</u> FEET FROM THE <u>North</u> LINE AND <u>880</u> FEET FROM THE <u>East</u> LINE, SECTION <u>21</u> TOWNSHIP <u>30N</u> RANGE <u>12W</u> NMPM.		10. Field and Pool, or Wildcat Undesignated	
15. Elevation (Show whether DF, RT, GR, etc.) 5655 G.L.		12. County San Juan	

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"/>	PLUS AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>	COMMENCE DRILLING OPER. <input type="checkbox"/>	PLUS AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input 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.

Will complete in Fruitland Formation rather than Pictured Cliffs Formation

RECEIVED
SEP 10 1985
OIL CON. DIV.
DIST. 3

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

SIGNED Ray Z. Zitelman TITLE Agent DATE 9/9/85

Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT # 3

APPROVED BY _____ TITLE _____ DATE SEP 10 1985

CONDITIONS OF APPROVAL, IF ANY:

