

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

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

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.  
30-045-27890

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.)

7. Lease Name or Unit Agreement Name

Florance Gas Com "G"

1. Type of Well:  
OIL WELL  GAS WELL  OTHER

8. Well No.  
#1

2. Name of Operator  
Amoco Production Company Att: J.L. Hampton

9. Pool name or Wildcat  
Basin Fruitland Coal Gas

3. Address of Operator  
P.O. Box 800 Denver, Colorado 80201

4. Well Location  
Unit Letter B : 1190 Feet From The North Line and 1490 Feet From The East Line  
Section 30 Township 30N Range 8W NMPM San Juan County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
5694' GR

11. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: APD Extension <input checked="" type="checkbox"/>

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 requests an extension on the subject well's approved APD which expires on December 18, 1991.

*Extension Expires 6-18-92*

RECEIVED  
JAN 6 1992  
OIL CON. DIV.  
DIST. 3

Please contact Cindy Burton (303) 830-5119 if you have any questions.

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

SIGNATURE John L. Hampton TITLE Sr. Staff Admin. Supr. DATE 1/2/92  
TYPE OR PRINT NAME John L. Hampton TELEPHONE NO. (303) 830-5025

(This space for State Use)

APPROVED BY Original Signed by FRANK T. CHAVEZ TITLE SUPERVISOR DISTRICT # 3 DATE JAN 06 1992

CONDITIONS OF APPROVAL, IF ANY: