

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
1900 Rio Brazos Rd., Aztec, NM 87410

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

WELL API NO
30-059-20343

5. Indicate Type of Lease
STATE FEE

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
BDCDGE-2134

8. Well No
141X

9. Pool name or Wildcat
Tubb

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 WELL GAS WELL OTHER CO2

2. Name of Operator
Amoco Production Company

3. Address of Operator
PO Box 606, Clayton, NM 88415

4. Well Location
Unit Letter **F** 1883 Feet From The North Line and 1700 Feet From The West Line
Section 14 Township 21N Range 34E NMCN Union County

10. Elevation (Show whether DF, RKB, RT, GR, etc)
4647.4 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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER <input type="checkbox"/>		OTHER Completion <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.

- 2134-141X
1. MI/RU CTBU 9/18/95.
 2. Clean out drlg mud to 2195' x spot perf fluid.
 3. Perf 2070-2158. 6 Spf. 432 total shots.
 4. RD MOCTBU 9/19/95
 5. Flow test well overnight. Shut in.
 6. WO pipeline connection.

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

SIGNATURE Billy E. Prichard TITLE Field Foreman DATE 9/21/95

TYPE OR PRINT NAME Billy E Prichard TELEPHONE NO 374-3053

(This space for Sign. Line)

APPROVED BY R. E. Johnson TITLE DISTRICT SUPERVISOR DATE 9-26-95

CONDITIONS OF APPROVAL, IF ANY