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OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease

State [X] Fee [ ]

5. State Oil & Gas Lease No.

1533-1/2

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 [X]   GAS WELL [ ]   OTHER-

7. Unit Agreement Name

2. Name of Operator

Amerada Petroleum Corporation

8. Farm or Lease Name

State "O"

3. Address of Operator

P. O. Box 668 - Hobbs, New Mexico

9. Well No.

2

4. Location of Well

UNIT LETTER **G** , **1980** FEET FROM THE **North** LINE AND **1980** FEET FROM

THE **East** LINE, SECTION **30** TOWNSHIP **19-S** RANGE **37-E** NMPM.

10. Field and Pool, or Wildcat

Monument

15. Elevation *(Show whether DF, RT, GR, etc.)*

3634' DF

12. County

Lea

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK [ ]

TEMPORARILY ABANDON [ ]

PULL OR ALTER CASING [ ]

PLUG AND ABANDON [ ]

CHANGE PLANS [ ]

OTHER _____ [ ]

SUBSEQUENT REPORT OF:
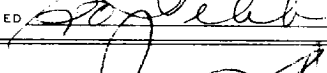
REMEDIAL WORK [X]

COMMENCE DRILLING OPNS. [ ]

CASING TEST AND CEMENT JOB [ ]

OTHER _____

ALTERING CASING [ ]

PLUG AND ABANDONMENT [ ]

_____ [ ]

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.

Pulled rods, pump and tubing. Ran sand pump. String shot open hole 3844' to 3964' with 300 grains per ft. Ran sand pump and cleaned out open hole. String shot open hole from 3844' to 3964' with 500 grains per ft. Ran sand pump and cleaned out open hole. Ran tubing and acidized open hole from 3842' to 3964' with 500 gals. 15% NE acid. Ran rods and pump and resumed production.

No change in producing status.

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

SIGNED _____ TITLE **District Superintendent** DATE **4-29-68**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: