

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

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

Form C-103
Revised 10-

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
A-1212

SUNDY 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 TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. Unit Agreement Name
2. Name of Operator Amoco Production Company	8. Farm or Lease Name State A2 RA/A
3. Address of Operator P. O. Box 68, Hobbs, New Mexico 88240	9. Well No. 11-Y
4. Location of well UNIT LETTER C 810 North 2030 West 4 19-S 38-E THE LINE, SECTION TOWNSHIP RANGE NMPM.	10. Field and Pool, or wildcat Wildcat Yates
11. Elevation (Show whether DF, RT, GR, etc.) 3639' DF	12. County Lea

10. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☒	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	

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.

Propose to plug and abandon the subject well per the following:

Move in service unit and pull tubing and Guiberson Uni VI packer. Packer set at 2541'. RIH with CIBP and set at 2600'. Cap with 35' of class "C" neat. Spot 79 bbl 10# brine with 25# gel/bbl. Perforate 9-5/8" casing at 1525'-1526' with 4 JSPF. Run in hole with cement retainer and set at 1475'. Establish circulation behind 9-5/8" casing. Squeeze 435 sx class "C" neat behind 9-5/8" casing. Circulate to surface. Spot 114 bbl of 10# brine with 25# gel/bbl. Spot 10 sx class "C" neat from 30' to surface. Weld on cap and erect permanent abandonment marker. Notify NMOCD prior to setting plugs.

O+4-NMOCD,H 1-HOU 1-CMH 1-W.Stafford, HOU

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

SIGNED Charles M. Lerring TITLE Assist. Admin. Analyst DATE 3-4-83

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

TITLE _____

MAR 8 1983

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

MAR 7 1983

O.C.D. [illegible]
HOBS OFFICE