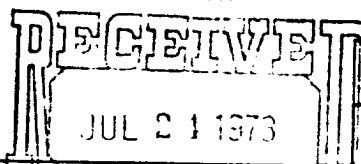


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OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

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



3a. Indicate Type of Lease  
State ☒ Fee ☐  
3. State Oil & Gas Lease No.  
1-5622

SUNDY NOTICES AND REPORTS ON WELLS CONSERVATION COM  
(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 type="checkbox"/> OTHER- <u>DRILLING</u>	7. Unit Agreement Name
2. Name of Operator <u>Amoco Production Company</u>	8. Farm or Lease Name <u>STATE FA</u>
3. Address of Operator <u>BOX 68, HOBBS, N. M. 88240</u>	9. Well No. <u>1</u>
4. Location of Well UNIT LETTER <u>E</u> <u>1980</u> FEET FROM THE <u>NORTH</u> LINE AND <u>660</u> FEET FROM THE <u>WEST</u> LINE, SECTION <u>29</u> TOWNSHIP <u>24-N</u> RANGE <u>27-E</u> NMPM.	10. Field and Pool, or Wildcat <u>WILDCAT</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>6160 GL, 6172 R.D.B.</u>	12. County <u>COLFAX</u>

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"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" 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 1703.

On 7-22-73 4 1/2" OD 9.5" H-55 Casing was set @  
2325' w/ 560.04. Incon neat w/ 50# Flowseal in first 200.04.  
Tested casing w/ 1500 psi for 30 min. Test O.K.  
RREL and suspended operations, on 7-22-73,  
pending finalization of completions arrangements.

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

SIGNED <u>Roy R. Yoakum</u>	TITLE <u>ADMINISTRATIVE ASSISTANT</u>	DATE <u>7-23-73</u>
41. NMOC. SF ATT: JERKORTING C. SUSP CONDITIONS OF APPROVAL (IF ANY): C. DIV	TITLE <u>Alt. Ins. Inspector</u>	DATE <u>9/13/73</u>