Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

Salita Fe, New Mexico 87304-2088 5. Indicate Type of DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 6. State Oil & Gas 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 Office Offi	-
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1. Type of Well Other	Unit Agreement Name 02 GAS UNIT
2. Name of Operator Amoco Production Company 3. Address of operator P.O. Box 806. CLAYTON, NEW MEXICO 88415 4. Well Location Unit Letter F: 1980 Feet From The NORTH Line and 1980 Feet From TI Section 12 Township 18N Range 31E NMPM H 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4458.2 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other I NOTICE OF INTENTION TO: SUBSEQUENT REPORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALT EMPORABILLY ABANDON CHANGE PLANS CASING TEST AND CEMENT JOB OTHER: 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date work.) SEE RULE 1103. YEAR MONTH/DAY TUBING PRESSURE CASING PRESSURE BLEED DOWN TIME 1990 JUNE 22 470# 0 1991 JUNE 17 475# 0 1992 JUNE 16 460# 0 1993 MAY 25 460# 0 1993 MAY 25 460# 0 1994 MAY 27 1460# 0 1995 JUNE 9 400# 0 1996 JUNE 9 400# 0 1997 JUNE 16 460# 0 1998 JUNE 16 460# 0 1999 JUNE 17 475# 0 1999 JUNE 18 460# 0 1999 JUNE 1990 JUNE 19 460# 0 1999 JUNE 19	
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SIGNATURE	1-17-90
TYPE OR PRINT NAME M.L. CLAY	DATE O / / J
This space for State Use)	TELEPHONE NO. (505) 374-309