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
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

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

WELL API NO.
30-021-20075

5. Indicate Type of Lease STATE [X] FEE [ ]

6. State Oil & Gas Lease No.

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)

7. Lease Name or Unit Agreement Name
BDCDGU-1832

1. Type of Well:
OIL WELL [ ] GAS WELL [ ] OTHER CO2

2. Name of Operator
Amoco Production Company

8. Well No.
101

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

9. Pool name or Wildcat
Tubb

4. Well Location
Unit Letter G : 1980 Feet From The North Line and 1980 Feet From The East Line

Section 10 Township 18N Range 32E NMPM Harding County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4620.4 GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	[ ]	PLUG AND ABANDON	[ ]	REMEDIAL WORK	[ ]	ALTERING CASING	[ ]
TEMPORARILY ABANDON	[X]	CHANGE PLANS	[ ]	COMMENCE DRILLING OPNS.	[ ]	PLUG AND ABANDONMENT	[ ]
PULL OR ALTER CASING	[ ]			CASING TEST AND CEMENT JOB	[ ]		
OTHER:	[ ]			OTHER:			[ ]

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.

1832-101G

1. **MI/RU SU.**
2. **Retrieve standing valve.**
3. **Kill well as necessary.**
4. **Pull tubing and packer.**
5. **Run cast iron bridge plug and set @ 2270 + or -.**
6. **Pressure test plug and casing to 500 psi if ok.**
7. **Install well cap**
8. **RDMOSU.**
9. **Check annually for pressure.**

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

SIGNATURE Billy E Prichard TITLE Field Foreman DATE 9/5/95

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

(This space for State Use)

APPROVED BY Ry E Johnson TITLE DISTRICT SUPERVISOR DATE 9-11-95

CONDITIONS OF APPROVAL, IF ANY: