

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.

30-021-20139

5. Indicate Type of Lease

STATE ☐

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.)

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☒

CO₂

OTHER

2. Name of Operator

AMOCO PRODUCTION COMPANY

3. Address of Operator

P.O. Box 3092 HOUSTON TEXAS 77253

4. Well Location

Unit Letter F : 1980 Feet From The NORTH Line and 1980 Feet From The WEST Line

Section 24 Township T20N Range R31E NMPM HARDING County

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

4702

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☒

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

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.

Propose To:

1. Load wellbore with 2% KCL water and pull packer and tubing. Inspect packer and tubing for damage. If pressure communication due to packer and/or connections, replace and return to shut-in status. Otherwise, continue with following procedure.
2. Run in hole with cast iron bridge plug and set at 2,100 ft
3. Spot 10 sacks of Class C neat on CIBP. Wait on cement overnight.
4. Load wellbore and pressure test to 500 psi for 30 min. If pressure test fails, authorization to permanently P&A will be pursued.
5. Rig down and move out service company.

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

SIGNATURE Mark Randolph TITLE ADMIN ANALYST DATE 4-12-91

TYPE OR PRINT NAME MARK RANDOLPH TELEPHONE NO. 713-556-32

(This space for State Use)

APPROVED BY RgE/Johnson TITLE DISTRICT SUPERVISOR DATE 4-19-91

CONDITIONS OF APPROVAL, IF ANY: