

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-7

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT DEPTH. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. ☐ OIL WELL ☒ GAS WELL ☐ CO2 ☐ OTHER	5a. Indicate Type of Lease State ☐ Fed ☒
2. Name of Operator AMOCO PRODUCTION COMPANY	7. Unit Agreement Name BDCDGU
3. Address of Operator P. O. Box 68, Hobbs, NM 88240	8. Farm or Lease Name BDCDGU
4. Location of Well UNIT LETTER <u>G</u> <u>1650</u> FEET FROM THE <u>North</u> <u>1650</u> FEET FROM THE <u>East</u> <u>24</u> LINE, SECTION <u>18-N</u> <u>33-E</u> RANGE <u>33-E</u> TOWNSHIP <u>18-N</u> RANGE <u>33-E</u> NMPM.	9. Well No. 1833 241G
10. Field and Pool, or Wildcat Und. Tubb	
11. Elevation (Show whether DF, RT, GR, etc.) 4778' GL	12. County Harding

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

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

OTHER ☐ request extension

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

OTHER ☐

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.

We request a 90 day extension to our application for permit to drill on the subject well. It was approved 11-28-83 and expires 2-26-84.

0+2-NMOCD,SF 1-HOU R. E. Ogden, Rm. 21.150 1-F. J. Nash, HOU Rm. 4.206 1-SUSP 1-PJS
1-Amerada 1-Cities Service 1-Conoco 1-CO2 In Action 1-Excelsior 1-Sun. Tex. 1-Exxon
1-Jim Russell, Clayton

APPROVAL VALID FOR 90 DAYS
PERMIT EXPIRES 5-26-84
UNLESS DRILLING UNDERWAY

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

SIGNED Peter J. Serna

TITLE Assist. Admin. Analyst

DATE 2-3-84

APPROVED BY [Signature]

TITLE [Signature]

DATE 2-7-84

CONDITIONS OF APPROVAL, IF ANY: