

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.
30-021-20209

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, TX 77253

4. Well Location
Unit Letter J : 2310 1830 Feet From The South Line and 2310 1830 Feet From The East Line
Section 35 Township T21N Range R29E NMPM Harding County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
5409

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:

Nipple up Blow out preventer. Tag cast iron bridge plug set at 2200 ft. Spot 75 sacks of class C cement. Load casing with 2% KCL water, pressure casing to 250 psi. Wait on Cement overnight. Tag top of cement, pressure test casing to 500 psi. If o.k., displace well with gelled brine water. Pull tubing to 800 ft. and spot 25 sacks of cement. Pull tubing and spot 10 sacks at surface. Install PXA marker and clean location.

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

SIGNATURE Mark D. Randolph TITLE Administrative Analyst DATE 07-19-91

TYPE OR PRINT NAME Mark D. Randolph (713) TELEPHONE NO. 556-3216

(This space for State Use)

APPROVED BY [Signature] TITLE DISTRICT SUPERVISOR DATE 8-15-91

CONDITIONS OF APPROVAL, IF ANY: