Energy, Minerals and Natural Resources

Form C-103 Revised 1-1-89

DISTRICT I			CONSE	ERVATI	ON DI	VISION							
P.O. Box 1980, Hobbs, NM 88240 P.O.Box 20 DISTRICT II Santa Fe New Mayin									WELL API NO. 3004523573				
P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexic						0 87504-2088			5. Indicate Type of Lease				
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410									STATE FEE 6. State Oil & Gas Lease No.				
								6. State C	JII & Gas	s Lease No	•		
(DO NOT LISE TI	SUNDRY	NOTICES	S AND REI	PORTS ON	WELLS								
(DO NOT USE T	R PERMI	PLUG BACK T"	TOA	7. Lease Name or Unit Agreement Name									
Type of Well:	.)				HUTCHIN LS								
OIL OIL													
OIL GAS WELL OTHER 2. Name of Operator AMOCO PRODUCTION COMPANY Attention						Nancy I. Whitaker			8. Well No.				
AMOCO FRODUCTION COMPANY						Transy I. Williams			#2				
P.O. Box 800	x 800 Denver Colorado			80201 303-830-5039				9. Pool name or Wildcat PICTURED CLIFFS					
Well Location Unit Letter	G .	1500 -		NOF	TH		154	40			EAST		
Offit Letter		F	eet From The	NOF		_ Line and _		Fee	et From	The	EAST	Line	
Section	7	Т	ownship	31N	Range	10W		МРМ	S	AN JUA	N	County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)													
					5822 (SR 							
11. Check Appropriate Box to Indicate Nature of Notice Report or Other Data NOTICE OF INTENTION TO: SUBSECUENT REPORT OF													
CODSEQUENT REPORT OF.													
PERFORM REMEDIAL WORK PLUG AND ABANDON PLUG AND ABANDON						REMEDIAL WORK ALTERING CASING							
TEMPORARILY ABANDON CHANGE PLANS						COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT							
PULL OR ALTER CASING						CASING TEST AND CEMENT JOB							
DTHER: DEMAND LTR FOLLOW UP						OTHER:							
12. Describe Propose work) SEE RULI	ed or Complete E 1103.	d Operation	s (Clearly sta	te all pertinent	details, an	d give pertiner	nt dates,	including es	stimated	date of sta	irting any	proposed	
, 444000 PROBUOT										·X			
AMOCO PRODUCT	ION COMPAN	Y IS REQU	ESTING TO	CONTINUE T	ESTING O	F THE ABOV	Æ WELL	FOR AN A	ADDITIC	NAL 90 DA	YS_		
the contract of the contract o													
					-								
I hereby certify that t	he information	above is tru	e and complet	te to the best o	f my knowl								
SIGNATURE / CO	vy S	ryu	upe		TTTLE	St	aff Ass	sistant		_	0-02-19	197 ————	
TYPE OR PRINT NAME	<u>/ i</u>	Nancy I. V	Whitaker		· · · · · · · · · · · · · · · · · · ·			TEL	EPHONE N	ю. 30	3-830-5	039	
(This space for State)												
APPROVED BY	Jahnn.	, Ro	Luoro	*	DEP	UTY OIL & (GAS INS	SPECTOR. I	DIST #	is on	OT	£ 10 07	
CONDITIONS OF APPRO	VAL IF ANY	7			TITLE					_ DATE \	-	0 1771	
	+	Appro	oud/tx	pirts,	122	97							