STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease: State [X] Fee [ ]

5. State Oil & Gas Lease No.: OG-202

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. OIL WELL [X] GAS WELL [ ] OTHER-

7. Unit Agreement Name:

2. Name of Operator: AMOCO PRODUCTION COMPANY

8. Farm or Lease Name: STATE DC

3. Address of Operator: P.O. BOX 68, HOBBS, NEW MEXICO 88240

9. Well No.: 1

4. Location of Well: UNIT LETTER P, 660 FEET FROM THE South LINE AND 660 FEET FROM THE East LINE, SECTION 16 TOWNSHIP 11-S RANGE 33-E NMPM.

10. Field and Pool, or Wildcat: Bagley Permo Penn, North

15. Elevation (Show whether DF, RT, GR, etc.): 4285' RDB

12. County: Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

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

Propose to perforate additional pay and evaluate productivity as follows:
MISU and POH with rods and pump. Release tubing anchor. Lower tubing and confirm PBTD 10,613'. RIH and perforate Penn interval 10,574'-10,584' with 4 DP JSPF. RIH with packer and set at 10,540'. Swab test interval. If well swabs dry, pump 1000 gals 15% NEFE HCl acid and flush with 80 BBLS 2% KCl. If well swabs commercially productive, RIH with production equipment and return well to production. If well swabs Non-Commercial, RIH with CIBP and set at 10,500'. Cap CIBP with 35' cement and rerun production equipment. Return well to production and MOSU.

0+5 NMOCD, HL 1-JRB 1-FJN 1-CMH

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

SIGNED Parker M. Kerrin TITLE ADMINISTRATIVE ANALYST (SG) DATE 8/27/85

APPROVED BY Eddie W. Seay Oil & Gas Inspector TITLE _____ DATE AUG 30 1985

CONDITIONS OF APPROVAL, IF ANY: