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.
30-059-20018

5. Indicate Type of Lease STATE [X] 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.)

7. Lease Name or Unit Agreement Name
BDCDGU-2234

1. Type of Well:
OIL WELL [ ] GAS WELL [ ] OTHER CO2

2. Name of Operator
Amoco Exploration & Production

8. Well No.
361

3. Address of Operator
PO Box 606, Clayton, NM 88415

9. Pool name or Wildcat
Tubb

4. Well Location
Unit Letter P : 660 Feet From The South Line and 660 Feet From The East Line

Section 36 Township 22N Range 34E NMPM Union County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4635 GR

11. 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	[ ]	CHANGE PLANS	[ ]	COMMENCE DRILLING OPNS.	[ ]	PLUG AND ABANDONMENT	[ ]
PULL OR ALTER CASING	[ ]			CASING TEST AND CEMENT JOB	[ ]		
OTHER:	[ ]			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.

1. MI/RU SU
2. POH, laydown steel Tbg x Pkr
3. RIH with new Fiberglass Tbg x existing Pkr
4. Swab & flow test well for two days
5. RD x MO SU
6. MI/RU SU
7. Release Pkr
8. TOH w/Tbg x Pkr
9. RIH W/4" gun and perforate with 32 gram charge and 6 spf over the following intervals: 2034-2042, 2051-2058, 2064-2068, 2070-2096, 2106-2120, 2150-2164
10. TIH with Tbg and Pkr. Set Pkr at approx,. 2020'
11. Swab well to flow for clean up
12. Continue flow test and MOSU
13. Flow test not to exceed 5 days
14. SI well at end of flow test

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

SIGNATURE Billy E. Prichard TITLE Field Foreman DATE 6/29/95

TYPE OR PRINT NAME Billy E Prichard TELEPHONE NO. 374-3053

(This space for State Use)

APPROVED BY Ry E Johnson TITLE DISTRICT SUPERVISOR DATE 7-5-95

CONDITIONS OF APPROVAL, IF ANY: