

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

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

Form C-103  
Revised 10-1-78

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE W	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease

State ☐

Fee ☒

5. 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 "A" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL ☐

GAS WELL ☒ C02

OTHER-

Name of Operator

Amoco Production Company

Address of Operator

P. O. Box 68 Hobbs, NM 88240

Location of Well

UNIT LETTER G 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE East LINE; SECTION 27 TOWNSHIP 20-N RANGE 34-E NMPM.

7. Unit Agreement Name

8. Farm or Lease Name

Hutcherson B

9. Well No.

25

10. Field and Pool, or Wildcat

Und. Tubb

11. Elevation (Show whether DF, RT, GR, etc.)

4750' GL

12. County

Union

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

REMEDIAL WORK ☐

ALTERING CASING ☐

TEMPORARILY ABANDON ☐

COMMENCE DRILLING OPNS. ☒

PLUG AND ABANDONMENT ☐

RELL OR ALTER CASING ☐

CHANGE PLANS ☐

CASING TEST AND CEMENT JOB ☒

OTHER ☐

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.

On 2-2-81 C02 in Action Drilling (Rig #18) spudded a 12-1/4" hole at 6:00 p.m. Drilled to a TD of 730' and 8-5/8" casing set at 730'. Cemented with 500 SX Class H cement. Plugged down at 3:00 p.m. 2-3-81. Circulated 25 SX. WOC 18 hrs. Tested casing with 800# for 30 min. Test OK. Reduced hole to 7-7/8" and resumed drilling. Drilled to a TD of 2582' and ran 5-1/2" casing set 2582'. Cemented with 925 SX Class H cement. Plugged down at 9:45 p.m. 2-11-81. Circulated 235 SX. Currently waiting on completion unit.

0+2-NMOCD, SF

1-Hou

1-Susp

1-BD

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

SIGNED Bob Davis

TITLE Admin. Analyst

DATE 2-17-81

APPROVED BY Carl Leary

TITLE Assistant Director

DATE 2/20/81

CONDITIONS OF APPROVAL, IF ANY