

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-79

TO: SUPERVISOR	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

3a. Indicate Type of Lease
State ☒ Fee ☐
3. 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.)

1. ☐ OIL WELL ☒ GAS WELL ☒ CO2 ☐ OTHER	7. Unit Agreement Name
2. Name of Operator Amoco Production Company	8. Form or Lease Name State JW
3. Address of Operator P. O. Box 68 Hobbs, NM 88240	9. Well No. 1
4. Location of Well UNIT LETTER <u>G</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>23</u> TOWNSHIP <u>21-N</u> RANGE <u>34-E</u> NMPM.	10. Field and Pool, or Wildcat Und. Tubb
15. Elevation (Show whether DF, RT, GR, etc.) 4740' 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 ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPER. ☒	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☒	

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.

On 3-12-81 Moran Brothers (Rig #56) spudded a 12-1/4" hole at 7:00 a.m. Drilled to a TD of 737' and ran 8-5/8" casing set at 737'. Cemented with 500 SX Class H cement. Plugged down 2:45 p.m. 3-13-81. Circulated 133 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 3010' and ran 5-1/2" casing set at 2990'. Cemented with 1000 SX Class H cement. Plugged down 2:30 a.m. 3-22-81. Circulated 275 SX. Currently waiting on completion unit.

0+2-NMOCD, SF 1-Hou 1-Susp 1-BD

18. 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 3-27-81

APPROVED BY Carl Illwog TITLE SEAL ON FILE DATE 4/1/81

CONDITIONS OF APPROVAL, IF ANY: