

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.                 | 30-059-20128                                                           |
| 5. Indicate Type of Lease    | STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 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 |
| 8. Well No.                          | 071         |
| 9. Pool name or Wildcat              | Tubb        |

|                                                                                                   |                                                                                                                                                                                                                         |
|---------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Type of Well:<br>OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER CO2 | 2. Name of Operator<br>Amoco Exploration & Production                                                                                                                                                                   |
| 3. Address of Operator<br>PO Box 606 Clayton NM 88415                                             | 4. Well Location<br>Unit Letter <u>E</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>West</u> Line<br>Section <u>7</u> Township <u>22N</u> Range <u>34E</u> NMPM <u>Union</u> County |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.)<br>4905' GR                                    |                                                                                                                                                                                                                         |

|                                                                               |                                                     |
|-------------------------------------------------------------------------------|-----------------------------------------------------|
| 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data |                                                     |
| NOTICE OF INTENTION TO:                                                       | SUBSEQUENT REPORT OF:                               |
| PERFORM REMEDIAL WORK <input type="checkbox"/>                                | REMEDIAL WORK <input checked="" type="checkbox"/>   |
| TEMPORARILY ABANDON <input type="checkbox"/>                                  | ALTERING CASING <input type="checkbox"/>            |
| PULL OR ALTER CASING <input type="checkbox"/>                                 | COMMENCE DRILLING OPNS. <input type="checkbox"/>    |
| OTHER: <input type="checkbox"/>                                               | PLUG AND ABANDONMENT <input type="checkbox"/>       |
|                                                                               | CASING TEST AND CEMENT JOB <input type="checkbox"/> |
|                                                                               | OTHER: <input type="checkbox"/>                     |

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. Move in rig up service unit 7/07/95.
2. Nipple up BOP.
3. Pull & lay down production tbg & pkr.
4. Perf: 2222-2232, 2256-2259, 2262-2265, 2268-2270, 2272-2278, 2280-2282, 2290-2294, 2294-2300, 2304-2316, 2333-2338, 2346-2354, 6 spf.
5. Run 3.5 fiberglass tbg.
6. Pkr set at 2114'.
7. Pressure test casing & pkr to 500 psi. OK.
8. Rig down move out service unit 7/08/95.
7. Flow test well 24 hrs. Shut in.
9. Wait on pipeline connection.

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 7/13/95  
TYPE OR PRINT NAME Billy E Prichard TELEPHONE NO. 374-3053

(This space for State Use)

APPROVED BY Ry E Johnson DISTRICT SUPERVISOR DATE 7/17/95  
CONDITIONS OF APPROVAL IF ANY: