

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. 30-059-20340
5. Indicate Type of Lease STATE ☐ 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 Production Company		8. Well No. 291
3. Address of Operator PO Box 606, Clayton, NM 88415		9. Pool Name or Wildcat Tubb	
4. Well Location Unit Letter <u>C</u> : <u>1650</u> Feet From The <u>North</u> Line and <u>1945</u> Feet From The <u>East</u> Line Section <u>29</u> Township <u>22N</u> Range <u>34E</u> NMPM <u>Union</u> County			
10. Elevation (Show whether DF, RRB, RT, GR, etc.) 4825.50 GR			

11. 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 OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER: ☐		OTHER: <u>Completion</u> ☒	

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.

2234-291G

1. MI/RU CTBU 8/26/95.
2. Clean out drlg mud to 2386' x spot perf fluid.
3. Perf 2140-2350, 6 Spf, 948 total shots.
4. RD MOCTBU 8/26/95
5. Flow test well overnight. Shut in.
6. WO 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 8/29/94
TYPE OR PRINT NAME Billy E Prichard TELEPHONE NO. 374-3053

(This space for State Use)

APPROVED BY R. E. Prichard DISTRICT SUPERVISOR DATE 8/31/95
CONDITIONS OF APPROVAL, IF ANY