

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
2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.	30-059-20351
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.)	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER C02	7. Lease Name or Unit Agreement Name BDCDGU-2135
2. Name of Operator Amoco Production Company	8. Well No. 182
3. Address of Operator PO Box 606, Clayton, NM 88415	9. Pool name or Wildcat Tubb
4. Well Location Unit Letter D : 660 Feet From The North Line and 660 Feet From The West Line Section 18 Township 21N Range 35E NMPM Union County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4733.30' GR	

11.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☒ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
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. MIRT
2. SPUD 7/18/96
3. DRILL 12 1/4" HOLE 0' TO 718'
4. RUN 8 5/8" 24# J55 CSG, CSG SET AT 722'
5. CMT WITH 375 SKS CLASS C CMT & CIRC 34 SKS TO PIT
6. WOC & NIPPLE UP BOP, PRESSURE TST BOP TO 500 PSI-OK

7. DRILL 7 7/8" HOLE FROM 718' TO 2285'
8. RUN 3 JTS OF 5 1/2" 15.50# J55 CSG & 72 JTS OF 5 1/2" FIBERGLASS CSG, CST SET AT 2285';
9. CMT WITH 350 SKS OF CLASS C CMT, CIRC 67 SKS TO PIT
10. RIG RELEASED 7/22/96
11. MORT
12. WAIT ON SERVICE UNIT

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 7/30/96

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

(This space for State Use)

APPROVED BY Ry E Prichard TITLE DISTRICT SUPERVISOR DATE 8-5-96
CONDITIONS OF APPROVAL, IF ANY