

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
2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.
30-059-20354
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" 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 CO2	7. Lease Name or Unit Agreement Name BDCDGU-2234
2. Name of Operator AMOCO PRODUCTION COMPANY	8. Well No. 212
3. Address of Operator PO BOX 606, CLAYTON, NM 88415	9. Pool name or Wildcat TUBB
4. Well Location Unit Letter M : 660 Feet From The SOUTH Line and 660 Feet From The WEST Line Section 21 Township 22N Range 34E NMPM UNION County	10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4851.20' GL

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 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: Completion <input checked="" 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. MIRUCTU 7/30/96
2. RUN 4"OD PERF GUNS ON COIL TBG
3. PERF 2103' TO 2345' W/8 DPS PER FT
4. FLOW WELL OVERNIGHT
5. RDMOCTU 7/30/96
7. TURN WELL TO PRODUCTION 7/31/96

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 9/7/96
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 8-12-96
CONDITIONS OF APPROVAL, IF ANY: