State of New Mexico

Form C-103 Submit 3 Copies Energy, Minerals and Natural Resources Department to Appropriate District Office Revised 1-1-89 OIL CONSERVATION DIVISION DISTRICT WELL API NO. 2 P.O. Box 1980, Hobbs, NM 88240 2040 Pacheco St. 30-059-2036 Santa Fe, NM 87505 **DISTRICT II** P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease FEE X STATE DISTRICT III 6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Type of Well: GAS WELL OIL CO2 BDCDGU-2135 OTHER 2. Name of Operator 8. Well No. 202 Amoco Production Company Address of Operator 9. Pool name or Wildcat PO Box 606, Clayton, NM 88415 Well Location Tubb ____ Line and 176 Unit Letter M: 1173 Feet From The South West Feet From The Line Range 35E 20 21N Union Township **NMPM** Section County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4709.10' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. 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:. 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. 2135-202M 7. DRILL 7 7/8" HOLE FROM 728' TO 2270' 8. RUN 4 JTS OF 5 1/2" 15.50# J55 CSG & 74 I. MIRT JTS OF 5 1/2" FIBERGLASS CSG, CST SET 2. SPUD 7/26/96 3. DRILL 12 1/4" HOLE 0' TO 728' AT 2270; 4. RUN 8 5/8" 24# J55 CSG, CSG SET AT 9. CMT WITH 350 SKS OF CLASS C CMT, CIRC 70 SKS TO PIT 728 5. CMT WITH 400 SKS CLASS C CMT & 10. RIG RELEASED 7/30/96 CIRC 76 SKS TO PIT 11. MORT 6. WOC & NIPPLE UP BOP, PRESSURE TST 12. WAIT ON SERVICE UNIT BOP TO 500 PSI-OK I hereby certify that the information above

mu Field Foreman DATE 8/7/96 SIGNATURE -**TELEPHONE** NO. 374 - 3053Billy E Prichard TYPE OR PRINT NAME

(This space for State Use)

CONDITIONS OF APPROVAL, IF AN

DISTRICT SUPERVISOR