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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State ☐	Fee ☒
5. 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. OIL WELL ☒ GAS WELL ☐ OTHER- ☐	7. Unit Agreement Name
2. Name of Operator AMOCO PRODUCTION COMPANY	8. Farm or Lease Name Phelps Dodge "B"
3. Address of Operator 501 Airport Drive, Farmington, New Mexico 87401	9. Well No. 1
4. Location of Well UNIT LETTER L , 1660 FEET FROM THE South LINE AND 580 FEET FROM THE West LINE, SECTION 30 TOWNSHIP 28N RANGE 21E NMPM.	10. Field and Pool, or Wildcat Wildcat
15. Elevation (Show whether DF, RT, GR, etc.) 6259' GL ungraded	12. County Colfax

16.

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 ☐

17. 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.

The subject well was spudded at 6:00 p.m., October 8, 1974, with a 12-1/4" hole drilled to 112'. The 8-5/8" casing was set at 110' with 80 sacks Class "A" cement with 2% CaCl on October 9, 1974. The cement circulated. Tested the blowout preventer and casing to 250 psi for 30 minutes OK after waiting on cement to set 10-1/2 hours. The hole was reduced to 6-1/2" at 112' and drilling continued.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED GL Hamilton TITLE Area Adm. Supvr. DATE October 11, 1974

APPROVED BY Carl Ulvog TITLE SENIOR PETROLEUM GEOLOGIST DATE 10/15/74

CONDITIONS OF APPROVAL, IF ANY: