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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

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

107-17-1580

5d. Indicate Type of Lease
State ☐ Fee ☒

5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PRODUCTION TO BE LIFTED OR TO BE PRODUCED IN A DIFFERENT RESERVOIR, OR FOR A LOCATION FOR PRODUCTION (SEE RULE 1103) FOR SUCH OPERATIONS.)

1. ☐ OIL WELL ☒ GAS WELL ☒ CO₂ ☐ OTHER

2. Name of Operator
Amoco Production Company

3. Address of Operator
P. O. Box 68 Hobbs, NM 88240

4. Location of Well
UNIT LETTER M 660 FEET FROM THE South LINE AND 660 FEET FROM
THE West LINE, SECTION 3 TOWNSHIP 19-N RANGE 33-E NMPK.

7. Unit Agreement Name

6. Farm or Lease Name

Heimann

9. Well No.

1

10. Field and Pool, or Wildcat

Und. Tubb

15. Elevation (Show whether DF, RT, GR, etc.)

4969 RDB

12. County

Harding

16. 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 ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

PULL OR ALTER CASING ☐

CHANGE PLANS ☐

CASING TEST AND CEMENT JOB ☐

OTHER ☐

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.

Propose to cement behind 4-1/2" production casing per the following procedure:

Kill well. Pull tubing and packer. Set a retrievable bridge plug at 2200' and cap with sand. Run pipe recovery log to determine top of cement. Perforate 20' above top of cement. Set packer 300' above perfs. Establish circulation. Pump 16 bbl. colored dye. Pump sufficient Class C cement to circulate. WOC. Pull tubing, packer, and bridge plug. Run tubing and packer.

0+2-NMOCD, SF 1-Hou 1-Susp 1-LBG

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

SIGNED Bob Davis

TITLE Admin. Analyst

DATE 10-2-80

APPROVED BY [Signature]
CONDITIONS OF APPROVAL, IF ANY:

TITLE [Signature]

DATE 10-2-80