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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 <input type="checkbox"/> | Fee <input checked="" type="checkbox"/> |
| 5. State Oil & Gas Lease No.   |                                         |
| 7. Unit Agreement Name         |                                         |
| 8. Farm or Lease Name          |                                         |
| Heimann                        |                                         |
| 9. Well No.                    |                                         |
| 4                              |                                         |
| 10. Field and Pool, or Wildcat |                                         |
| Und Tubb                       |                                         |
| 12. County                     |                                         |
| Harding                        |                                         |

## 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 L-11 (FORM C-101) FOR SUCH PROPOSALS.)

|                                         |                                                                       |                                |
|-----------------------------------------|-----------------------------------------------------------------------|--------------------------------|
| OIL WELL <input type="checkbox"/>       | GAS WELL <input checked="" type="checkbox"/> CO <sub>2</sub>          | OTHER <input type="checkbox"/> |
| 1. Name of Operator                     |                                                                       |                                |
| Amoco Production Company                |                                                                       |                                |
| 2. Address of Operator                  |                                                                       |                                |
| P. O. Box 68, Hobbs, NM 88240           |                                                                       |                                |
| 3. Location of Well                     |                                                                       |                                |
| UNIT LETTER <u>K</u>                    | <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM |                                |
| THE <u>West</u> LINE, SECTION <u>34</u> | TOWNSHIP <u>20-N</u> RANGE <u>33-E</u> N.M.P.M.                       |                                |

|                                               |
|-----------------------------------------------|
| 15. Elevation (Show whether DF, RT, GR, etc.) |
| 4893.7 GR                                     |

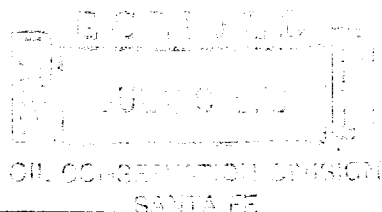
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

|                                                |                                           |
|------------------------------------------------|-------------------------------------------|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     |
| PULL OR ALTER CASING <input type="checkbox"/>  | OTHER <input type="checkbox"/>            |

|                                                                |                                               |
|----------------------------------------------------------------|-----------------------------------------------|
| SUBSEQUENT REPORT OF:                                          |                                               |
| REMEDIAL WORK <input type="checkbox"/>                         | ALTERING CASING <input type="checkbox"/>      |
| COMMENCE DRILLING OPNS. <input type="checkbox"/>               | PLUG AND ABANDONMENT <input type="checkbox"/> |
| CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/> | OTHER <input type="checkbox"/>                |

16. 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.

Moved in completion unit 6-25-79. Ran 4-1/2" 9.5# K-55 liner. Top of liner 2172', bottom 2571'. Overlap 106'. Cemented with 50 SX Class C cement with 9.5# salt/SX. WOC 18 hrs. Tested casing with 1500# for 30 min. OK. Drill cement out of top of liner 2172'-2177'. Prep to perforate.



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

SIGNED Ray Cox TITLE Administrative Supervisor DATE 7-23-79

APPROVED BY Carl Zilvag TITLE SENIOR PETROLEUM GEOLOGIST DATE 7/27/79

CONDITIONS OF APPROVAL, IF ANY:  
0+2-NMOCD,SF; 1-Hou; 1-Susp; 1-BD