STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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# OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-7

5a. Indicate Type of Lease: State [X] 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.)

7. Unit Agreement Name

1. OIL WELL [ ] GAS WELL [X] CO2 OTHER-

8. Farm or Lease Name: State JV

2. Name of Operator: Amoco Production Company

9. Well No.: 1

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

10. Field and Pool, or Wildcat: Und. Tubb

4. Location of Well
UNIT LETTER G, 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE East LINE, SECTION 21 TOWNSHIP 21-N RANGE 34-E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.): 4795' GL

12. County: Union

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. [X] | PLUG AND ABANDONMENT [ ] |
| PULL OR ALTER CASING [ ] | CHANGE PLANS [ ] | CASING TEST AND CEMENT JOB [X] | |
| 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.

On 3-1-81 Moran Brother Drilling (Rig #56) spudded a 12-1/4" hole at 11:00 p.m. Drilled to a TD of 735' and ran 8-5/8" casing set at 735'. Cemented with 500 SX Class H cement. Plugged down 12:30 p.m. 3-3-81. Circulated 95 SX. WOC 19 hrs. Tested casing with 800# for 30 min. Test OK. Reduced hole to 7-7/8" and resumed drilling. Drilled to a TD of 2975' and ran 5-1/2" casing set at 2975'. Cemented with 900 SX Class H cement. Plugged down 9:00 a.m. 3-10-81. Circulated 95 SX. Currently waiting on completion unit.

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

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

SIGNED Bob Lavis TITLE Admin. Analyst DATE 3-12-81

APPROVED BY Chas Lewis TITLE [illegible] DATE 3/18/81

CONDITIONS OF APPROVAL, IF ANY: