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LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-70

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. Well	☐	2. Gas	☐	3. OTHER	C02
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4. Name of Operator

MOCO PRODUCTION COMPANY

5. Address of Operator

P. O. Box 68, Hobbs, NM 88240

6. Location of Well

7. Section	J	8. Township	1650-	9. Range	South	10. Feet from	1650
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11. Line	East	12. Section	24	13. Township	18-N	14. Range	35-E
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15. Elevation (Show whether DF, RT, GR, etc.)

4505' GL

12. County
Union

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

16. Remedial Work	☒
17. Partially Abandon	☐
18. Alter Casing	☐

19. Plug and Abandon	☐
20. Change Plans	☐

21. Remedial Work	☐
22. Commence Drilling Opns.	☐
23. Casing Test and Cement Job	☐
24. Other	☐

25. Altering Casing	☐
26. Plug and Abandonment	☐

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed operations) SEE RULE 1103.

Propose to fracture stimulate the Tubb formation to increase gas production. MI and RUSU. Frac down well with 40# HEC gel, liquid CO2 and 8/16 Brady Sand. Mix gel in 2% KCL fresh water. 10,000# Shut well-in for 1 hour after frac job. Clean out sand fill to 2430 as necessary. Return to sales. RIH with production equipment. Set packer at 2270. RD and MOSU.

MOCD, SF 1-R.A. Sheppard HOU. Rm. 20.156 1-J.F. Nash HOU. Rm. 17.188 1-SBB
1-Amerada Hess 1-Amerigas 1-Cities Service 1-Conoco 1-CO2 in Action 1-Shell
on 1-WF, Hobbs

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

S. Brownlee

TITLE Admin. Analyst

DATE 4-24-87

By *Ry E. Johnson*

TITLE

DATE

4-30-87

COPIES OF APPROVAL, IF ANY:

