

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-059-20299
5. Indicate Type of Lease STATE ☐ FEE ☒
6. 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. Lease Name or Unit Agreement Name BDCDGU - 2134	
1. Type of Well: OIL WELL ☐ GAS WELL ☒ OTHER CO₂	2. Name of Operator Amoco Production Company		8. Well No. 301F
3. Address of Operator PO Box 606 Clayton NM 88415		9. Pool name or Wildcat Tubb	
4. Well Location Unit Letter F : 2026 Feet From The West Line and 1979 Feet From The North Line Section 30 Township T21N Range R34E NMPM UNION County		10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4957	

11. 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 ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☒	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☒	
OTHER: ☐		OTHER: ☐	

12. 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.

MIRU DRUG UNIT/SPUD 12 1/4 SURF HOLE ON 7/17/93. DRILL TO 691. RAN 17 JOINTS OF 8.625, 24#, K-55 CSG, SET @ 691. CEMENT W/450 SKS CLASS "A", CIRC. 35 BBLs, PRESSURE TEST CSG TO 500 PSI. DRILL 7 7/8 HOLE TO 2576. RAN 88 JOINTS OF 4 1/2 FIBERGLASS, SET @ 2576. CEMENT W/480 SKS CLASS "A", CIRC. TO SURFACE. WELL SI. WOOL AND PLC.

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

SIGNATURE

Billy E. Prichard

TITLE

FIELD FOREMAN

DATE

7-27-93

TYPE OR PRINT NAME

Billy E. PRICHARD

505.374.3053

TELEPHONE NO.

(This space for State Use)

APPROVED BY

Ry E. Johnson

TITLE

DISTRICT SUPERVISOR

DATE

7-27-93

CONDITIONS OF APPROVAL, IF ANY: