

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. 30-059-20301
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.)	
1. Type of Well: OIL WELL ☐ GAS WELL ☒ OTHER CO2	7. Lease Name or Unit Agreement Name BDCDGL - 2232
2. Name of Operator Amoco Production Company	8. Well No. 261G
3. Address of Operator PO Box 606 Clayton NM 88415	9. Pool name or Wildcat Tubb
4. Well Location Unit Letter G : 2005 Feet From The East Line and 1974 Feet From The North Line Section 26 Township T22N Range R32E NMPM Union County	10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4844

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☒
OTHER: ☐	PLUG AND ABANDONMENT ☐
	CASING TEST AND CEMENT JOB ☒
	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 Drlg. Unit / Spud 12 1/4 surf. hole on 7/31/93. Drill to 687. Ran 17 joints of 8.625 24# K-55 CSG. Set @ 687. Cement w/450 SKS, CLASS "A". Circ. 129 SKS. Pressure test casing to 500 PSI. Drill 7 7/8 hole to 2350. Ran 80 joints of 4 1/2 Fiberglass. Set @ 2350. Cement w/600 SKS, CLASS "A", Circ. 115 SKS to surface. Well SF. WOCU 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 8/16/93
TYPE OR PRINT NAME Billy E. Prichard TELEPHONE NO. 5053743053

(This space for State Use)

APPROVED BY Ry E. Johnson TITLE DISTRICT SUPERVISOR DATE 8-20-93
CONDITIONS OF APPROVAL, IF ANY: