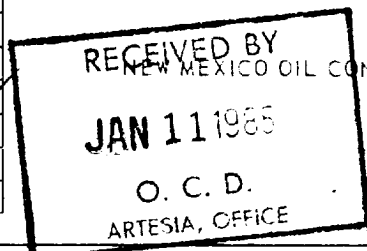


COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	<input type="checkbox"/>
LAND OFFICE	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>



Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-85

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>

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 TO GO BACK TO A DIFFERENT RESERVOIR.  
USE APPLICATION FOR PERMIT TO DRILL (FORM C-101) FOR SUCH PROPOSALS.

1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Unit Agreement Name
2. Name of Operator Petroleum Development Corporation ✓	8. Farm or Lease Name Johnson Com.
3. Address of Operator 9720-B Candelaria N.E., Albuquerque, NM 87112	9. Well No. 1
4. Location of Well UNIT LETTER <u>B</u> <u>660'</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>19</u> TOWNSHIP <u>6S</u> RANGE <u>22E</u> NMPM.	10. Field and Pool, or Wildcat W. Pecos Slope
15. Elevation (show whether DF, RT, GR, etc.) 3400'	12. County Chaves

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐  
OTHER ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐  
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER ☐ Surface Casing

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.

Spud date: 5:30 p.m. 1/2/85.

Ran 22 jts. 8 5/8" 24# API casing. Set at 941'. Cemented w/200 sx C1 "C" 2% CaCl.

Plug down at 10:30 p.m. 1/3/85.

Tagged top of cement at 607'. Brought Cement to sfc.(1" kobe pipe) at 6:30 p.m. 1/4/85.  
Pumped 575 sx w/5% CaCl in 13 stages. WOC - 4 hrs.

Pressure tested casing & BOP to 1500 psi for 30 mins. Held ok.

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

SIGNED Gary L. Roberts TITLE Field Manager DATE 1/6/85

APPROVED BY Original Signed By Leslie A. Clements Supervisor District II TITLE  DATE JAN 16 1985  
CONDITIONS OF APPROVAL, IF ANY: