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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

MAR 29 1972

5a. Indicate Type of Lease	State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	647

SUNDY 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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Amoco Production Company	8. Farm or Lease Name STATE BE
3. Address of Operator BOX 68, HOBBS, N. M. 88240	9. Well No. 2
4. Location of Well UNIT LETTER L, 1651.12 FEET FROM THE SOUTH LINE AND 1089.33 FEET FROM THE WEST LINE, SECTION 31, TOWNSHIP 17-S, RANGE 28-E, NMPM.	10. Field and Pool, or Wildcat EMPIRE ABO
15. Elevation (Show whether DF, RT, GR, etc.) 3685' R.D.B.	11. County EDDY

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	

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.

In an effort to increase productivity remedial work performed as follows:

cut paraffin from casing and tubing.
cleaned out paraffin and sand to PBD 5942'
Set packer @ 5873' w/tyg landed in pkr.
Evaluated and restored to production.

Prior - Pmp 32 BD + 0 BW 24 hrs.
after - Flow 79 BD + 0 BW 24 hrs.

TD - 5971'
PBD - 5942'
4 1/2" CSA 5971'

OC - 3-7-72
COMP. 3-27-72

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

AREA SUPERINTENDENT

SIGNED _____ TITLE _____ DATE MAR 27 1972

0+2 NMOC-ART

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

1- Sys P
1- HONDA

TITLE

DATE

MAR 29 1972