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LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

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

RECEIVED

AUG 16 1978

5a. Indicate Type of Lease

State ☒

Fee ☐

5. State Oil & Gas Lease No.

647-368

7. Unit Agreement Name

Empire South Deep Unit

8. Farm or Lease Name

Empire South Deep Unit

9. Well No.

19

10. Field and Pool, or Wildcat

South Empire Morrow

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO CEMENT OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101, FOR SUCH PROPOSALS.)

1. ☐ OIL WELL ☒ GAS WELL ☐ OTHER- **O. C. C. ARTESIA, OFFICE**

2. Name of Operator
Amoco Production Company

3. Address of Operator
P. O. Drawer "A", Levelland, Texas 79336

4. Location of Well
UNIT LETTER H 2280 FEET FROM THE North LINE AND 660 FEET FROM
THE East LINE, SECTION 36 TOWNSHIP 17-S RANGE 28-E N.M.P.M.

15. Elevation (Show whether DF, KT, GR, etc.)

3692.9 RDB

12. County

Eddy

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

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

PLUG AND ABANDON ☐
CHANGE PLANS ☐

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☒

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

OTHER ☐

OTHER ☐

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.

Drilled to a TD of 2906' and set 8 5/8" 32# K-55 ST&C casing at 2906'. Cemented with 1200 sacks HOWCOLITE with additives and 200 sacks Class C. Plugged down 9:45 p.m. 6-21-78. Circulated 65 sacks. Wait on cement 24 hours. Tested casing with 2000# for 30 minutes. OK. Reduced hole to 7 7/8" and resumed drilling.

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

SIGNED Ray W. Cox TITLE Administrative Supervisor DATE 8-15-78

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

1-DIV. 1-SUSP. 1-RC. 21-Partners