

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

OCT 1 1980

O. C. D.
ARTESIA, OFFICE

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. LG-5995

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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- 2. Name of Operator Amoco Production Company ✓ 3. Address of Operator P. O. Box 68 Hobbs, NM 88240 4. Location of Well UNIT LETTER I, 2310 FEET FROM THE South LINE AND 660 FEET FROM THE East LINE, SECTION 8 TOWNSHIP 22-S RANGE 26-E NMPM.	7. Unit Agreement Name 8. Farm or Lease Name Lancaster Spring Com. 9. Well No. 1 10. Field and Pool, or Wildcat Und. Happy Valley Morrow 11. Elevation (Show whether DF, RT, GR, etc.) 3414.0' GI 12. County Eddy
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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 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"/>	OTHER <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.

Request permission to extend TD from 11700' to 11900'.

0+4-NMOCD, A 1-Hou 1-Susp 1-LBG 1-W. Stafford, Hou
1-Inexco 1-Pogo Prod. 1-Cottom Pet. 1-Read X Stevens
1-Holly 1-E. L. Latham

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

SIGNED Benton Greer TITLE Assist. Admin. Analyst DATE 9-24-80

APPROVED BY W. A. Greer TITLE SUPERVISOR, DISTRICT II DATE OCT 6 1980

CONDITIONS OF APPROVAL, IF ANY: