

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.	30-015-23437
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	LG-5995
7. Lease Name or Unit Agreement Name	Lancaster Spring Com.
8. Well No.	1
9. Pool name or Wildcat	Happy Valley Morrow
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	GR 3414'

SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED
(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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	MAR 17 '89
2. Name of Operator Amoco Production Company	C.C.D. ARTESIA, OFFICE
3. Address of Operator P.O. Box 3092 Houston, TX 77253	
4. Well Location Unit Letter I : 2310 Feet From The South Line and 660 Feet From The East Line Section B Township 22-S Range 26-E NMPM Eddy County	

11. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: update well record <input checked="" type="checkbox"/>

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.
Intention to perf additional Morrow pay filed 11-25-85 and approved 12-5-85. This filing to update well record.
Work was never done.

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

SIGNATURE Amelia Hartman TITLE Asst. Admin. Analyst DATE 3-15-89
TYPE OR PRINT NAME Amelia Hartman TELEPHONE NO. (713) 584-7442

(This space for State Use)

Original Signed By
Mike Williams

APPROVED BY _____ TITLE _____ DATE MAR 20 1989

CONDITIONS OF APPROVAL, IF ANY: