STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISHECTIVED

SANTAFE	Р. О. ВО				Revised 10	
FILE	SANTA FE, NEW		0.1001 -			
U.S.G.S.	-(MAY	8 1981 [5a. Indicate Type	of Lease	
LAND OFFICE	-1			State X	Fee	
OPERATOR]	O. C.	. D. 🏻 🏗	5. State Oll & Gas	Lease No.	
	-	ARTESIA,	OFFICE	L-6368		
IDD NOT USE THIS FORM FOR PR	RY NOTICES AND REPORTS ON OPERALS TO UNILL ON TO DELPEN OF PLUG B	ACN TO A DIFFERENT RESERVO	ola.			III
1.		n Proposics.		7, Unit Agreement	Name	7777
OIL GAS WELL X	OTHER-	•				
1. Name of Operator		·		8, Form or Lease	Name	
Amoco Production Company			.	Lancaster Spring Com.		
), Address of Operator	-parity			9. Well No.		
P. O. Box 68 Hobbs	. NM 88240		į	2		
4. Location of Well	, 1117 002-10			10. Field and Pool	l or Wildest	
UNIT LETTER K 1980 FEET FROM THE South LINE AND 1980 FEET FROM				Hanny Valley Monn		
UNIT LETTER K , 19	OU FEET FROM THE SOUTH	LINE AND 1980	_ FEET FROM	CTTTTTTTT	valley v	7777
THE West LINE, SECTI	10N 9 TOWNSHIP 22-S	RANGE 26-E	NMPN.			
	15, Elevation (Show whether	DE RT GR etc.)		12. County	4444	HH.
				Eddy		
		353.6' GL	1		<i>VIIIII</i>	7777
Check	Appropriate Box To Indicate N	ature of Notice, Rep	ort or Othe	er Data		
NOTICE OF I	NTENTION TO:	SUB	SEQUENT	REPORT OF:		
			_			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERIN	G CASING	
TEMPORARILY ABAHDON		COMMENCE DRILLING OPHS.	X	PLUG AN	D ABANDOHMENT	, [
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT J	۵. 🗌			
		OTHER	·			_
OTHER						
		<u>. </u>				
 Describe Proposed or Completed Op- work) SEE RULE 1903. 	perations (Clearly state all pertinent deta	ils, and give pertinent date	s, including e	stimated date of st	arting any prop	oosed
300 sacks Thixset wi 1% Ar7. Plug down a Ran temperature surve	rilling Co. (Rig #3) spud f 13-3/8" 48# H-40 casing th 7-1/4" Celloflake foll t 5:00 p.m. 3-28-81. Cem ey. TCMT 440'. Ran 1" t . Reduced hole to 12-1/4	and set at 726'. owed by 650 sacks ent did not circu o 430' and cement	Cement Class ' late. W ed with	ed with C" with OC 6 hrs.		
					_	
O+5-NMOCD, A 1-Ho	ou 1-Susp 1-W. Sta	afford, Hou 1	-GPM			
d. I hereby dertify that the information	knbove is true and complete to the best o	f my knowledge and belief,				
Here Gleg Mile	Kell TITLE	Admin. Analyst		DATE 5-6	-8/	
J						