

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-103
Revised 10-1-7

SEP 28 1981

5a. Indicate Type of Lease
State ☐ For ☒

5. State Oil & Gas Lease No.

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Amoco Production Company	8. Farm or Lease Name Ingalls
3. Address of Operator P. O. Box 68, Hobbs, NM 88240	9. Well No. 1
4. Location of Well UNIT LETTER G 1650 FEET FROM THE North LINE AND 1980 FEET FROM THE East LINE, SECTION 22 TOWNSHIP 23-S RANGE 28-E NMPM.	10. Field and Pool, or Wildcat
11. Elevation (Show whether DF, RT, GR, etc.) 3002' GL	12. 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 type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <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"/>	Status Report <input checked="" 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.

Well was placed to production and flowed for two days. After two days well could no longer flow and was shut-in. A pumping unit was installed and well was placed back on production. Last 24 hrs. well pumped 33 BO x 19 BW X 183 MCF. Well is shut-in pending increase in allowable.

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

SIGNED Amy Mitchell TITLE Admin. Analyst DATE 9-28-81

APPROVED BY A. A. Gressett TITLE SUPERVISOR, DISTRICT 11 DATE SEP 30 1981

CONDITIONS OF APPROVAL, IF ANY: