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NEW MEXICO OIL CONSERVATION COMMISSION

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

RECEIVED

JUL 25 1979

O.C.C.

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.)

OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>	5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
Name of Operator Amoco Production Company ✓			5. State Oil & Gas Lease No.
Address of Operator P. O. Box 68, Hobbs, NM 88240			7. Unit Agreement Name
Location of Well UNIT LETTER J 1980 South 1980 THE East LINE, SECTION 24 TOWNSHIP 23-S RANGE 28-E N.M.P.M.			8. Farm or Lease Name Brantley B Gas Com.
			9. Well No. 1
			10. Field and Pool, or Wildcat Und. Morrow
15. Elevation (Show whether DF, RT, GR, etc.) 2967.8 GR			12. County Eddy

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER Extension <input checked="" type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER <input type="checkbox"/>	

16. 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 90 day extension of drilling permit.

APPROVAL VALID  
FOR 90 DAYS UNLESS  
DRILLING COMMENCED,  
EXPIRES 10-26-79

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

SIGNED Kay Cox TITLE Administrative Supervisor DATE 7-24-79  
APPROVED BY W. A. Gressett TITLE SUPERVISOR, DISTRICT II DATE JUL 26 1979

CONDITIONS OF APPROVAL, IF ANY:

0+4-NMOCD,A; 1-Hou; 1-Susp; 1-BD