

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

MAY - 6 1991

O. C. D.

WELL API NO.

30-015-26683

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. 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. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Amoco Production Company

3. Address of Operator

P. O. Box 3092, Houston, TX 77253

4. Well Location

Unit Letter L : 2074 Feet From The South Line and 444 Feet From The West Line

Section 22 Township 23-S Range 28-E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3028.1' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: Spud date & casing & cement report ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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.

MIRU 4/14/91

The well spud 4/14/91. Rigged up Peterson Rig #3.

Surface casing: 12-1/4" bit. Run 8-5/8" K-55 32#/ft ST & C csg X set @ 568'.

Cmt 550 sacks Class C. Circulate cmt to surface (200 sacks).

Production casing: 7-7/8" bit. Run 147 joints 5-1/2" K-55 15.5#/ft LT & C casing. Set @ 6307' depth. Cmt first stage w/700 sacks class H poz w/2% gel & 0.4% fluid loss additive & 0.3% cmt dsp & 5#/sack salt.

Open & circulate b/w stages. Circulate out 65 sacks. Cmt 2nd stage w/1200 sacks Class H poz w/2% gel & 0.4% fluid loss additive & 0.3% cmt dsp & 5#/sack salt.

Circulate 200 sacks to surface.

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

SIGNATURE

Kim A. Colvin

TITLE

Asst. Admin. Analyst

DATE

5/3/91

TYPE OR PRINT NAME

713/

TELEPHONE NO. 596-7686

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT II

APPROVED BY

TITLE

DATE

MAY 7 1991

CONDITIONS OF APPROVAL, IF ANY: