

NEW MEXICO OIL CONSERVATION COMMISSION

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LAND OFFICE	
OPERATOR	1

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. L-3536
7. Unit Agreement Name
8. Farm or Lease Name State GQ Com
9. Well No. 1
10. Field and Pool, or Wildcat Wildcat Morrow
12. County Eddy

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 - II" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL ☐ GAS WELL ☒ OTHER ☐

1. Name of Operator  
Amoco Production Company

2. Address of Operator  
P. O. Box 68, Hobbs, NM 88240

3. Location of Well  
UNIT LETTER J 1980 FEET FROM THE South LINE AND 1980 FEET FROM  
THE East LINE, SECTION 7 TOWNSHIP 25-S RANGE 28-E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)  
3089.2 RDB

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 OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER Ran DST 1 & 2 <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.

Drilled to a TD of 11900 and ran DST #1 11860'-11900'. Resumed drilling and drilled to a TD of 12866' and ran DST #2 12808'-12851'. Resumed drilling and drilled to a TD of 13290'. Ran cast iron bridge plug set at 8890'. Capped with 35' cement. Spotted 50 sx cement at 12450', 45 sx at 12150', and 45 sx at 11400'. Currently waiting on service unit.

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

SIGNED Ray Cox TITLE Administrative Supervisor DATE 7-24-79  
APPROVED BY W. A. Gressitt TITLE SUPERVISOR, DISTRICT II DATE AUG 3 1979

CONDITIONS OF APPROVAL, IF ANY:

O+4 NMOCD-A 1-Hou 1-Susp 1-BD 1-Pecos Irr. 1-Southland Royalty