

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

WELL API NO.	3004511925
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	State Corn D
8. Well No.	#5
9. Pool name or Wildcat	Blanco Mesa verde
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	6314 GR

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	2. Name of Operator AMOCO PRODUCTION COMPANY Attention Pat Archuleta
3. P.O. Box 800 Denver Colorado 80201 303-830-5217	4. Well Location Unit Letter <u>XF</u> : 1910 Feet From The NORTH Line and 1545 Feet From The WEST Line Section 32 Township 27N Range 8W NMPM SAN JUAN County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 6314 GR	

11. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <u>1257 90 day EXT</u> <input type="checkbox"/>

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.

Amoco Production Company requests a 90 day extension on this well as we are in the process of transferring ownership to Cross Timbers Operating Company, and the will evaluate this well.

RECEIVED
DEC - 2 1997
OIL CON. DIV.
DIST. 2

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

SIGNATURE Pat Archuleta TITLE Staff Assistant DATE 12-01-1997
TYPE OR PRINT NAME Pat Archuleta TELEPHONE NO. 303-830-5217

(This space for State

APPROVED BY Johnny Robinson TITLE DEPUTY OIL & GAS INSPECTOR, DIST. 2 DATE DEC - 2 1997
CONDITIONS OF APPROVAL, IF ANY: