Submit 3 Copies to Appropriate District Office

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-103
Revised 1-1-89

WELL API NO.

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.)

7. Lease Name or Unit Agreement Name: Marsrow Gas Com

1. Type of Well: OIL WELL ☐ GAS WELL ☒ OTHER

8. Well No. 1

2. Name of Operator: Amoco Production Company Attn: John Hampton

9. Pool name or Wildcat: Basin Dakota

3. Address of Operator: P.O. Box 800 Denver, Colorado 80201

4. Well Location
Unit Letter F : 1850 Feet From The North Line and 1850 Feet From The West Line

Section 15 Township 29N Range 12W NMPM San Juan County

10. Elevation (Show whether DF, RKB, RT, GR, etc.): 5585 KB

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	☐	PLUG AND ABANDON	☐	REMEDIAL WORK	☐	ALTERING CASING	☐
TEMPORARILY ABANDON	☐	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	PLUG AND ABANDONMENT	☐
PULL OR ALTER CASING	☐			CASING TEST AND CEMENT JOB	☐		
OTHER: Test casing and cement	☒			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.

Amoco production Company intends to test the casing integrity and cement across the Fruitland coal, if necessary, in the subject well using the attached procedures.

RECEIVED
OCT 2 1990
OIL CON. DIV
DIST. 3

Please call Cindy Burton at 303-830-5119 if you have any questions.

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

SIGNATURE J L Hampton/CAB TITLE Sr. Staff Admin. Supv. DATE 10/2/90

TYPE OR PRINT NAME John L. Hampton TELEPHONE NO. 303-830-5025

10-2-90

(This space for State Use)

APPROVED BY Frank Chavez TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3 DATE OCT 02 1990

CONDITIONS OF APPROVAL, IF ANY: