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to Appropriate
District Office

CONDITIONS OF APPROVAL, IF ANY:

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT I	OII CONSERVA	TION	DIVISION			
P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O.Box 2088			WELL API NO.		
DISTRICT II Sonto Fe New Maxico 87504-2088			3004513120			
r.o. Drawer DD, Ariesia, NM 88210				5. Indicate Type of L	STATE	FEE X
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410				6. State Oil & Gas L		
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:						
				7. Lease Name or Unit Agreement Name		
				Duff Gas Com /B/		
OIL CT GAS (57)						
WELL OTHER  2. Name of Operator Attention:				8. Well No.		
Amoco Production Company	Patty Haefele			1		
3. Address of Operator			(303) 830-4988	9. Pool name or Wil	deat	
P.O. Box 800 Denver 4. Well Location	Colorado 802	201	(000) 000-4500	Fulcher Kutz	Pictured (	Cliffs Ex
Unit Letter P : 119	90 Feet From The	South	Line and 80	O Feet From Th	ne East	Line
Section 27	Township 30N			impm S	an Juan	County
	10. Elevation (Sh	how wheth	er DF, RKB, RT, GR, etc.)			
II. Check An	propriete Poy to Ind	lionta N	5617' GR	nost or Other 1	Data	
NOTICE OF INT	propriate Box to Ind	ilcale I	1	SEQUENT REPO		
<del></del> 1		ज	30	DSEQUENT NEFT	ONI OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	×	REMEDIAL WORK	L AL	TERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLING	OPNS. 🗌 PLI	JG AND ABANDO	ONMENT 🗌
PULL OR ALTER CASING			CASING TEST AND CEMENT JOB			
OTHER:			OTHER:			
12. Describe Proposed or Completed Ope	erations (Clearly state all pert	inent deta	ils, and give pertinent dates, i	ncluding estimated date	of starting any pro	oposed
work) SEE RULE 1103.			, 8 per	a communes ware	og starting any pro	poscu
Amoco Production Company in	tends to plug and aban	idon the	subject well per the at	tached procedure	•	
					the second of th	The same agreement that
				ne a	de anar-	l Pan.
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				Di	ISSE SO WILL	10
•				-	Lo 60	
I hereby certify that the information abo	ve is true and complete to the	best of m	y knowledge and belief.			
SIGNATURE Patty Ha	efele		Staff Ass	istant	DATE 5-10	-95
TYPE OR PRINT NAME	<i>U</i> Patty Haefele		-	TEL	EPHONE NO. (303)	830-4988
(This space for State Use)						

THE DEPUTY OIL & GAS INSPECTOR, DESTRUMENT MAY 1 & 1905

Duff Gas Com B #1
Orig. Comp. 2/95
TD= 3600', PBTD = 1950'

- 1. Check location for anchors. Install if necessary. Test anchors.
- 2. MIRUSU. Blow down well. Kill if necessary with fresh water. NDWH. NUBOP.
  - 3. POOH with 2 3/8" tbg.. RIH with tbg and cement retainer. Set retainer at 1718'. Test casing integrity to 500#. Squeeze perfs at1768' to 1810' with 46 cuft of cement. Pull out of retainer and spot cement plug to 1500' with 25 cuft cement.
  - 4. Pull up hole and spot cement plug from 540' to surface with 54 cuft cement.
    - 5. NDBOP. Cut off casing and wellhead. Install PXA marker according to BLM or State requirements.
    - 6. Turn over to John Schwartz for reclamation.
    - 7. Rehabilitate location according to BLM or State requirements.

