

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5. Indicate Type of Lease
State ☒ Fee ☐
6. State Oil & Gas Lease No.
ST-OG-0959

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. ☐ OIL WELL ☒ GAS WELL ☐ OTHER-	7. Unit Agreement Name
2. Name of Operator Amoco Production Co.	8. Farm or Lease Name State Gas Com BJ
3. Address of Operator 501 Airport Drive, Farmington, N M 87401	9. Well No. 1E
4. Location of Well UNIT LETTER <u>K</u> <u>1760</u> FEET FROM THE <u>South</u> LINE AND <u>1630</u> FEET FROM THE <u>West</u> LINE, SECTION <u>2</u> TOWNSHIP <u>30N</u> RANGE <u>13W</u> NMPM.	10. Field and Pool, or Wildcat Basin Dakota
15. Elevation (Show whether DF, RT, GR, etc.) 5860' GR	12. County San Juan

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 ☐	OTHER <u>Extend APD</u> ☒	CASING TEST AND CEMENT JOBS ☐	OTHER ☐

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.

Amoco Production Company requests an extension of the APD for the subject well:
verbally approved, 4-7-86, Ernie Bush (NMOCD) to Mike Marlan (Amoco).

Extension expires 10-7-86

RECEIVED
APR 08 1986
OIL CON. DIV.
DIST. 3

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

SIGNED BS Shaw TITLE Adm. Supervisor DATE 4-7-86

APPROVED Original Signed by FRANK T. CHAVEZ TITLE SUPERVISOR DISTRICT # 3 DATE APR 08 1986

CONDITIONS OF APPROVAL, IF ANY: