Submit 3 Copies	State of New 1		Form C-103	
to Appropriale District Office	Energy, Minerals and Natural	Resources Department	Revised 1-1-8	,
DISTRICT I	OIL CONSERVATI	ION DIVISION	WELL API NO.	
P.O. Box 1980, Hobbs, NM 88240	P.O. Box 2088		30-045-27841	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088		5 Indicate Type of Lease		
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			STATE F 6. State Oil & Gas Lease No.	EE X
			W State Oil & Gas Lease NV	
	TICES AND REPORTS ON W			
(FORM	ROPUSALS TO DHILL OH TO DEEP RVOIR. USE "APPLICATION FOR F C-101) FOR SUCH PROPOSALS.)	PERMIT	7. Lease Name or Unit Agreement Name	
I. Type of Well:	1		State Gas Com "CB"	
WELL WELL XX OTHER Name of Operator			8. Well No / 2	
Amoco Production Company Attn: J.L. Hampton			°. Well No. #1/3	
. Address of Operator			9. Pool name or Wildcat Basin Fruitland Coal Gas	
P.O. Box 800 Denver, Well Location	Colorado 80201	•	basin fruittand Coar Gas	
	180 Feet From The South	line and 150	00 Feet From The West	Line
VIII 6/414/1	EFF 100 HOUTHE DOUCH	LIBE AUG	rea rion the West	
Section 32	Township 30N	Range 9W	NMPM San Juan	County
	7/////	her DF, RKB, RT, GR, etc.)		/////
		738' GR	SIIIIIIII	
	Appropriate Box to Indicat			
NOTICE OF IN	TENTION TO:	SUE	SSEQUENT REPORT OF:	
ERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
EMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN	G OPNS. PLUG AND ABANDON	MENT 🔲
ULL OR ALTER CASING		CASING TEST AND C	EMENT JOB	
	_	T Evtensi	on of APD	₹ X]
THER:		OTHER: DACCTIST		
 Describe Proposed or Completed Ope work) SEE RULE 1103. 	rations (Clearly state all pertinent details	s, and give persinent dates, incli	uding estimated date of starting any proposed	
work) SEE RULE 1103.				
Amoco requests an exte	nsion on the subject of	well's approved A	APD which expires on	
December 5,1991.		mode o approvou.	are mitem empires on	
		REPEIN		
		DEGER		
		100	2	
Fit is	expires 6-5-92	JAN 6 199		
(x renser		OIL CON.	VIC	
		DIST. 3		
Dioago gortast Ginan	Direct (202) 020 511			
	Burton (303) 830-5119		questions.	
I hereby certify that the information above is to	ue and complete to the best of my knowledge		India Supr	2
SIGNATURE SIGNATURE	uviqub	mu Sr. Staff A	DATE 1/2/1	<u> </u>
TYPE OR PRINT LAME JOHN L. I	Hampton -		TELEPHONE NO. (30	3) 830-5
(This space for State Use)				***************************************
	PRANK T CHAMPA	SUPERVISOR D	ISTRICT#3 IAN	0 & 100
ATTROVED BY Original Signed 1	y Frank T. Chavez	TITLE	DATE	<u>06 199</u>