Submit 3 Copies to Appropriate District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

RECEIVED
BLM
91 JUN 14 AM 10: 45
070 FARMINGTON, N.M.

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

WELL API NO.
30-045-27890

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
Florance Gas Com "G"

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

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

8. Well No.
#1

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

9. Pool name or Wildcat
Basin Fruitland Coal Gas

4. Well Location
Unit Letter B : 1190 Feet From The North Line and 1490 Feet From The East Line

Section 30 Township 30N Range 8W NMPM San Juan County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
5694" GR

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:	☐			OTHER: APD Extension	☒		

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 requests an extension on the subject wells approved APD which expires on 6/18/91.

APPROVAL EXPIRES 12-18-91
UNLESS DRILLING IS COMMENCED.
SPUD NOTICE MUST BE SUBMITTED
WITHIN 10 DAYS.

RECEIVED
JUN 24 1991
OIL CON. DIV.
DIST. 3

Please contact Cindy Burton (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/cb TITLE Sr. Staff Admin. Supr. DATE 6/13/91

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

(This space for State Use)

APPROVED BY Original Signed by CHARLES GHOLSON TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3 DATE JUN 24 1991

CONDITIONS OF APPROVAL, IF ANY: