NO. OF COPIES RECEIVED	5					Form C-103			
DISTRIBUTION						Supersedes C-102 and			
SANTA FE	7	NEW N	EXICO OIL CONS	SERVATION COMMISSION		Effective 1			
FILE	1-								
U.S.G.S.					50	. Indicate Ty]	
LAND OFFICE						State		e. X	
OPERATOR	3				5.	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. Unit Agreement Name			
I. OIL GA	s X	OTHER-				-			
2. Name of Operator AMOCO PRODUCTION COMPANY						8. Form or Lease Name Canepla Gas Com "B"			
3. Address of Operator					9	Well No.			
501 A1	rport Dr	ive, Farmin	gton, New Me	x1co 87401			1		
4. Location of Well					i		Pool, or Wildcat		
UNIT LETTER	1	190 FEET FR	OM THE South	LINE AND	FEET FROM	Blanco	Pictured	Cliff.	
• • • • • • • • • • • • • • • • • • •		-							
THE East	_ LINE, SECTIO	_N 13	TOWNSHIP 31N	RANGE 11W	имрм.			/////	
							7777777	444	
		/////		· DF, RT, GR, etc.)	1	2. County			
		.///// G	L 5733', KB	5744'		San Juan		77777	
16.	Check A	appropriate Bo	x To Indicate	Nature of Notice, Repo	rt or Othei	Data			
гои	TICE OF IN	TENTION TO:		SUBS	EQUENT F	EPORT O	F:		
								_	
PERFORM REMEDIAL WORK		PL	UG AND ABANDON	REMEDIAL WORK		ALT	ERING CASING		
TEMPORARILY ABANDON				COMMENCE DRILLING OPNS.		PLU	G AND ABANDONM	ENT	
PULL OR ALTER CASING		сн	ANGE PLANS	CASING TEST AND CEMENT JOE		_	•		
			_	OTHER Spud	& set su	rface ca	sing	_X	
OTHER									
work) SEE RULE 110 An 11" hole was and cemented to	s. es spudde	d November	29. 1971 and	tails, and give pertinent dates, idrilled to 236' wwith 2% CaCl. Hol	here 8–5	/8" cas:	ing was se	ıt	
236'.									
					(8)				
					DE	£ 10 K	971		
					1	CON. CODIST. 3	1		
19 I harahy cartify that the	he information	above is true and	complete to the hest	of my knowledge and belief.					
	al signed		•	, <u> </u>					
		₽₹		Amas Passan			December 8	2 107	
SIGNED	BANBAN_		TITLE	Area Engineer	·	DATE	NE ESTROST (· +7/	
Original Signed	by Emery	C. Arnold	T1T1 F	SUPERVISOR DIST.	#3.	DATE	DEC 1 0 19)7-	

CONDITIONS OF APPROVAL, IF ANY: