

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

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

WELL API NO.
3004527143

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.)

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

2. Name of Operator
Amoco Production

3. Address of Operator
2325 East 30th St., Farmington, NM 87401

4. Well Location
Unit Letter **G** : **1450** Feet From The **North** Line and **1550** Feet From The **East** Line
Section **13** Township **31N** Range **11W** NMPM **San Juan** County

8. Well No.
1

9. Pool name or Wildcat
Basin Fruitland Coal

10. Elevation (Show whether DF, RK3, RT, GR, etc.)
5866' 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: Initial Completion ☒	

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.

Pressure tested casing to 4800 lb. Perforated the following intervals: 2498 - 2507' and 2544 - 2576' for a total of 164 holes. Stucced interval 2498-2576' with 20,000 gal 30lb crosslinked gel. Had to replace because Howco sand bin broken. Replaced with 51876 gal 30lb crosslinked gel and 13000 lb 40/70 sand and 200000 lb 12/20 sand. Stuck with 2300 gal gel. moved in and rigged up service unit on 12-15-88. Logged 0' full. Sand 2.875" testing at 2473 ft and released rig at 1400 lb 12-16-88.

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

SIGNATURE

B. Shaw

TITLE

adm. Supervisor

DATE

1-31-89

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

APPROVED BY **Original Signed by FRANK T. CHAVEZ**

TITLE

3

DATE

FEB 03 1989

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

FEB 03 1989

OIL CON. DIV.