

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

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

WELL API NO. 30-045-28158
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Parsons Gas Com "A"
8. Well No. #1
9. Pool name or Wildcat Basin Fruitland Coal Gas
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 6131' GR

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER
2. Name of Operator Amoco Production Company ATTN: J.L. Hampton
3. Address of Operator P. O. Box 800 Denver, Colorado 80201
4. Well Location Unit Letter G : 2100' Feet From The North Line and 1840' Feet From The East Line Section 2 Township 31N Range 11W NMPM San Juan County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 6131' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: Extend APD <input checked="" type="checkbox"/>	OTHER: <input type="checkbox"/>

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 to extend the APD on the subject well. The APD was due to expire on 8/2//91. See attached request from the NMOCD.

Extension Expires 2-22-92

Please contact Cindy Burton (303)830-5119 if you have any questions.

RECEIVED
OCT 2 1991.
OIL CON. DIV.,
DIST. 3

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

SIGNATURE J.L. Hampton/cib TITLE Sr. Staff Admin. Supv. DATE 9/27/91
TYPE OR PRINT NAME J.L. Hampton TELEPHONE NO. 830-5025

(This space for State Use)

Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT #2

OCT 02 1991

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: