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**OFFICE OF O. C. C.**  
**NEW MEXICO OIL CONSERVATION COMMISSION**  
**JAN 4 1 35 PM '67**

Form C-103  
 Supersedes Old  
 C-102 and C-103  
 Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. <b>B-9950</b>	
7. Unit Agreement Name	
8. Farm or Lease Name <b>State BT "A"</b>	
9. Well No. <b>2</b>	
10. Field and Pool, or Wildcat <b>Bagley Penn</b>	
12. County <b>Lea</b>	

**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. OIL WELL  GAS WELL  OTHER **T.A.**

2. Name of Operator  
**Amerada Petroleum Corporation**

3. Address of Operator  
**P. O. Box 668 - Hobbs, New Mexico**

4. Location of Well  
 UNIT LETTER **G**, **1980** FEET FROM THE **North** LINE AND **1980** FEET FROM  
 THE **East** LINE, SECTION **2** TOWNSHIP **12-S** RANGE **33-E** NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)  
**4249' D.F.**

16. 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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <b>Temporarily Abandoned</b> <input checked="" type="checkbox"/>

17. 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.

**FOR RECORD ONLY - Closed in and temporarily abandoned with no other plans at this time.**

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

SIGNED B. J. Jones TITLE District Superintendent DATE 1-3-67

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: