

OIL CONSERVATION DIVISION

P. O. BOX 2038

SALTA PE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

NO. OF COPIES RECEIVED	
DATE RECEIVED	
NAME OF OFFICE	
ADDRESS	
PHONE NO.	
TELETYPE NO.	
INITIALS	

1. Location Type of Lease
 State Federal

2. State Oil & Gas Lease No.
F-218

3. Field Agreement No.

4. Field or Lease Name
State C Tr. 11

5. Well No.
11

6. Field and Pool, or Well
Wildcat Drinkard

7. Location (Block whether LF, RT, GR, etc.)
3523.9 GL

8. County
Lea

SHORRY NOTICES AND REPORTS ON WELLS

THIS REPORT IS TO BE FILED WITH THE STATE OIL & GAS COMMISSION, DEPARTMENT OF REVENUE, 1000 N. MEXICO STREET, ALBUQUERQUE, NEW MEXICO 87102.

9. Kind of Well
 Oil Well Other

10. Name of Operator
Amoco Production Company

11. Address of Operator
P. O. Box 68, Hobbs, NM 88240

12. Location of Well
 Well Letter **X** **510** FEET FROM THE **South** LINE AND **560** FEET FROM THE **East** LINE, SECTION **2** TOWNSHIP **21-S** RANGE **36-E** NEWM.

13. Location (Block whether LF, RT, GR, etc.)
3523.9 GL

14. County
Lea

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 checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE FLUID <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

15. Describe the nature of completed operations (clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Moved in completion unit 10-1-79. Tested casing with 1000# for 30 min. Test OK. Ran correlation log. Perforated 6719'-6725', 6756'-6762', 6765'-6775', 6794'-6798', 6808'-6812', 6828'-6832' with 2 JSPF. Ran tubing, packer, and tailpipe. Packer set at 6565'. Acidized with 5250 gals 15% NE acid. Ran Temp and Gamma Ray Logs. Currently flow testing.

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

SIGNED Bob Davis TITLE Assist. Administrative Analyst DATE 10-18-79

APPROVED BY Orig. Signed By Jerry Sexton Dist 1, Supv. TITLE _____ DATE OCT 23 1979

CONDITIONS OF APPROVAL, IF ANY:
 O+4 NMOCD-H, 1-Hou, 1-Susp, 1-BD