

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.

30-021-20236

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.)

7. Lease Name or Unit Agreement Name

2033

1. Type of Well

OIL
WELL ☐

GAS
WELL ☐

OTHER

CO₂ GAS

2. Name of Operator

Amoco Production Company

8. Well No.

221 G

3. Address of operator

PO Box 606 CLAYTON NEW MEXICO 88415

9. Pool name or Wildcat

TUBB

4. Well Location

Unit Letter G : 1980 Feet From The NORTH Line and 1980 Feet From The EAST Line

Section 21 Township 20N Range 33E NMPM HARDING County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

5022

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☒

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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.

Moved in service unit and spud a 12 1/4" surface hole 5/8/93.
Drilled to 725'. Ran 8 5/8" surface casing. Tested casing and
casing did not hold. Decision was made to abandon hole.
Pumped 60 sacks of class A cement down casing and
cemented to ground level. Installed P and A marker.

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

SIGNATURE

Mark Randolph

TITLE

Business Analyst

DATE

8/11/93

TYPE OR PRINT NAME

MARK RANDOLPH

BUSINESS ANALYST

TELEPHONE NO.

713
55632

(This space for State Use)

APPROVED BY

Ry Johnson

TITLE

DISTRICT SUPERVISOR

DATE

8-25-93

CONDITIONS OF APPROVAL, IF ANY: