

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. <u>30-021-70238</u>
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 <u>CO₂</u>	7. Lease Name or Unit Agreement Name <u>BDCDGLU 2033</u>
2. Name of Operator <u>Amoco Production Company</u>	8. Well No. <u>2016</u>
3. Address of Operator <u>PO Box 606 Clayton NM 88415</u>	9. Pool name or Wildcat <u>Tubb</u>
4. Well Location Unit Letter <u>G</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line Section <u>20</u> Township <u>T20N</u> Range <u>R33E</u> NMPM <u>Harding</u> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) <u>5037</u>	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	COMMENCE DRILLING OPNS. ☒
PULL OR ALTER CASING ☐	CASING TEST AND CEMENT JOB ☒
OTHER: ☐	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.

MIRU DRUG UNIT / SPUD 12 1/4 SURF HOLE ON 5/23/93. Drill to 706. RAN 18 JOINTS OF 8.625, 24# K-55 CASING SET @ 706. CEMENT W/450 SKS, CLASS "A", CIRC 116 SKS. PRESSURE TEST CASING TO 500 PSI. DRILL 7 7/8 HOLE TO 2460. RAN 83 JOINTS OF 4 1/2 FIBERGLASS, SET @ 2460. CEMENT W/480 SKS CLASS "A", CIRC. 27 BBLS TO SURFACE. PRESSURE TEST CASING TO 500 PSI. DRILL 3 7/8 HOLE TO 2538. WELL SE. WOOL AND PLC.

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

SIGNATURE Billy E. Prichard TITLE FIELD FOREMAN DATE 8/16/93
TYPE OR PRINT NAME BILLY E. PRICHARD TELEPHONE NO. 5053743053

(This space for State Use)

APPROVED BY [Signature] DISTRICT SUPERVISOR DATE 8-20-93
CONDITIONS OF APPROVAL, IF ANY: