

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 1960, 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
30-059-20317

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 CO2

2. Name of Operator
Amoco Exploration & Production

3. Address of Operator
PO Box 606, Clayton, NM 88415

4. Well Location
Unit Letter K : 2268 Feet From The South Line and 1834 Feet From The West Line

Section 7 Township 21N Range 35E NMPM Union County

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

4665 GR

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☒	PLUG AND ABANDONMENT ☐
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 1107

2135-071K

1. MIRURT 8/4/95

2. Drill 12.25" hole to 726'

3. Run 8.625 K55 24# ST&C casing. CSA 726'.

4. Cement with 375 sacks of Class C cement and additives.

5. Circulate 75 sacks to pit.

6. WOC.

7. Test casing and BOP to 500 psi. OK

8. Drill 7.875" hole from 726'-2206'. Run Logs.

9. Run 4 joints of 5.5" K55 15.50# ST&C casing and 74 joints of 5.5" 2000 psi Star fiberglass casing.

10. CSA 2206'. Cement with 375 sacks of Class C and additives. Circulate 78 sacks to pit.

11. RD MORT 8/6/95

12. Wait on completion unit

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 8/14/95

TYPE OR PRINT NAME

Billy E Prichard

TELEPHONE NO 374-3053

(This space for State Use)

APPROVED BY

Ry E Johnson

DISTRICT SUPERVISOR

DATE

8/18/95

CONDITIONS OF APPROVAL, IF ANY: