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NEW MEXICO OIL CONSERVATION COMMISSION

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

5a. Indicate Type of Lease: State XX Fee ☐

5. State Oil & Gas Lease No.: E-1442

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- **Drilling well**

7. Unit Agreement Name:

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

8. Farm or Lease Name: **Mathers-State Com.**

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

9. Well No.: **No. 1**

4. Location of Well: UNIT LETTER **D**, **660** FEET FROM THE **North** LINE AND **760** FEET FROM THE **West** LINE, SECTION **33** TOWNSHIP **11-S** RANGE **33-E** NMPM.

10. Field and Pool, or Wildcat: **North Bagley Lower Penn**

15. Elevation (Show whether DF, RT, GR, etc.): **4290' DF 4274' GL**

12. County: **Lea**

16. 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 ☐		COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	CHANGE PLANS ☐	CASING TEST AND CEMENT JOB ☒	
OTHER ☐		OTHER ☐	

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.

Drilled to a total depth of 3800'. Ran 47 jts. 8-5/8" 32# K-55 casing for 1512' and 73 jts. 8-5/8" 24# K-55 for 2288'. Casing set at 3800'. Cemented with 1000 sax Lite Wate cement and 150 sax Class "C" cement. Pumped plug to 3735'. W.O.C. 22 hrs. Tested 8-5/8" casing w/1800#. Held O.K. Started 7-7/8" hole at 4:00 a.m. on 2-7-69.

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

SIGNED L. O. Dodd TITLE **District Superintendent** DATE **Feb. 7, 1969**

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: