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LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

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

SEP 27 11 45 AM '67

5a. Indicate Type of Lease
State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>

5. 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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Salt Water Disposal

2. Name of Operator Amerada Petroleum Corporation
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3. Address of Operator P.O. Box 668 - Hobbs, New Mexico
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4. Location of Well UNIT LETTER C 660 FEET FROM THE North LINE AND 1980 FEET FROM
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THE West LINE, SECTION 11 TOWNSHIP 12S RANGE 33E NMPM.
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15. Elevation (Show whether DF, RT, GR, etc.) 4249' DF

7. Unit Agreement Name

8. Farm or Lease Name Bagley Salt Water Disposal

9. Well No. 2

10. Field and Pool, or Wildcat Bagley
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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 <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

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.

Plan to perforate 5-1/2" casing from 9057' to 9090' and 9294' to 9303'.
Acidize perms. with 2500 gals. 25% reg. acid and resume injection .

R 2 151
S 0 D

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

SIGNED <u>[Signature]</u>	TITLE <u>District Superintendent</u>	DATE <u>9-26-67</u>
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APPROVED BY <u>[Signature]</u>	TITLE <u></u>	DATE <u>SEP 26</u>
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CONDITIONS OF APPROVAL, IF ANY: