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OPERATOR	

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 [X] Fee [ ]

5. State Oil & Gas Lease No.
E-2109

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 [X] GAS WELL [ ] OTHER-

7. Unit Agreement Name

2. Name of Operator
PAN AMERICAN PETROLEUM CORPORATION

NAME CHANGED:
FROM: PAN AMERICAN PETR. CORP.
TO: AMOCO PRODUCTION CO.
EFFECTIVE: 2-1-71

8. Farm or Lease Name
STATE "CY"

3. Address of Operator
BOX 68, HOBBS, N. MEX. 88240

9. Well No.
1

4. Location of Well
UNIT LETTER M, 660 FEET FROM THE SOUTH LINE AND 612 FEET FROM THE WEST LINE, SECTION 30 TOWNSHIP 12-S RANGE 34-E NMPM.

10. Field and Pool, or Wildcat
EAST LIGHTNER LOWER PENN

15. Elevation *(Show whether DF, RT, GR, etc.)*
4229' R.D.B.

12. County
LEA

15.

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	[X]	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.

In an effort to restore well to production remedial work performed as follows:

Squeezed Perfs 9825-63 w/100 Sx cement. Cleaned out to 10300'. Perforated 10223-252 and acid with 1000 gal 15% HCL. Evaluated and restored to prod.

Prior - Pmp'd 80 x 40 BW 24 hr.
after - Pmp'd 25 80 x 65 BW 24 hr.

TD - 10374
PBD - 10300.

5½" @ 10374'
CIBP @ 10300'

OC - 11-24-68
Comp - 1-2-69

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

SIGNED _____ TITLE AREA SUPERINTENDENT DATE 1-2-69

042-NMOCC-(4)
1-MSO
1-USGS
1-RLH

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: