

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-77

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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.

L-986

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 ☐	7. Unit Agreement Name
2. Name of Operator AMOCO PRODUCTION COMPANY	8. Farm or Lease Name State DM
3. Address of Operator P.O. BOX 68 HOBBS, NEW MEXICO 88240	9. Well No. 1
4. Location of Well UNIT LETTER <u>P</u> <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE, SECTION <u>18</u> TOWNSHIP <u>13-S</u> RANGE <u>33-E</u> NMPM.	10. Field and Pool, or Wildcat Baum Upper Penn
15. Elevation (Show whether DF, RT, GR, etc.) 4298' RDB	12. County Lea

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 ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	

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.

Propose to repair surface pipe and return to production as follows:
MISU and POH with pump and rods. Release tubing anchor and pull tubing. RIH with RBP and set at $\pm 4,000$. POOH and repair surface pipe as necessary. Rebuild wellhead. RIH and retrieve RBP. Re-run production equipment. Set anchor $\pm 9,520'$ and return well to production.

OTS NMCO, H 1-JRB 1-ESN 1-CMH.

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

SIGNED Charles M. Herring

TITLE Administrative Analyst (SG)

DATE 10/28/85

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

OCT 30 1985

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

OCT 29 1985

O.C.D.
HOBBS OFFICE