

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 20811
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-7

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Mine
State ☒ Gas ☐ Fire ☐

5. State Oil & Gas Lease No.

LG-4904

SUNDARY 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 WITH FORM C-101 FOR SUCH PROPOSALS.

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. Unit Agreement Name
2. Name of Operator Amoco Production Company	8. Name of Lease Name State HB Com
3. Address of Operator P. O. Box 68, Hobbs, New Mexico 88240	9. Well No. 1
4. Location of well UNIT LETTER M 570 FEET FROM THE South LINE AND 540 FEET FROM THE West LINE. SECTION 18 TOWNSHIP 13-S RANGE 33-E N.M.P.M.	10. Field and Pool, or Wildcat Baum Upper Penn
15. Elevation (Show whether DF, RT, GR, etc.) 4291.6' GR	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☒
OTHER ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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 4061' and on 7-12-84 set 8-5/8", 24# and 32#, K-55 casing. Casing set at 4061'. Cemented with 1560 sx class C lite with 15# salt/sx. Tailed in with 400 sx class C neat. Plug down 2:15 pm. 7-12-84. Did not circulate cement. Ran temperature survey, TCMT 225'. WOC 18 hrs. Tested casing to 1000 psi for 30 min, tested OK. Reduced bit to 7/8" and resumed drilling.

0+5-NMOCD, H 1-J. R. Barnett, HOU Rm. 21.156 1-F. J. Nash, HOU Rm. 4.206 1-GCC 1-Sunburst

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

SIGNED Mary C. Clark TITLE Assist. Admin. Analyst DATE 7-17-84
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
APPROVED BY _____ TITLE _____ DATE JUL 19 1984
CONDITIONS OF APPROVAL, IF ANY: _____

RECEIVED

JUL 18 1984

O.C.O.
HOBBS OFFICE