

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

Form C-103  
Revised 10-1-77

|                        |  |
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| LAND OFFICE            |  |
| OPERATOR               |  |

1. Indicate Type of Lease  
State ☒ Fee ☐  
2. State Oil & Gas Lease No.  
LG-1532

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR APPLICATIONS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE APPLICATION FOR PERMIT WITH FORM C-101 FOR SUCH APPLICATIONS.

|                                                                                                                                                     |                                                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>                                    | 7. Unit Agreement State                           |
| 2. Name of Operator<br>AMOCO PRODUCTION COMPANY                                                                                                     | 8. Term of Lease Name<br>State NB                 |
| 3. Address of Operator<br>P. O. Box 68, Hobbs, New Mexico 88240                                                                                     | 9. Well No.<br>2                                  |
| 4. Location of Well<br>UNIT LETTER H 1980 FEET FROM THE North LINE AND 660 FEET FROM<br>The East LINE, SECTION 14 TOWNSHIP 13-S RANGE 32-E N.M.P.M. | 10. Field and Pool, or Wildcat<br>Baum Upper Penn |
| 11. Elevation (Show whether DF, RT, GR, etc.)<br>4306.6' GR                                                                                         | 12. County<br>Lea                                 |

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

|                                                |                                           |                                                                 |                                               |
|------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>                          | ALTERING CASING <input type="checkbox"/>      |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPERATIONS <input type="checkbox"/>           | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>  | OTHER <input type="checkbox"/>            | CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/> | OTHER <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.

Drilled to TD of 4060 and on 8-11-84 set 8-5/8" 32# and 24# K-55. Casing set at 4052'. Cemented with 1750 sx class C Lite with additives and 400 sx class C neat. Did not circulate, plug down 4:15 pm 8-11-84. TCMT 520' from Temperature survey. WOC 18 hrs and tested casing to 1000 psi for 30 min, tested OK. Reduced bit to 7-7/8" and resumed drilling.

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

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 8-14-84

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE AUG 16 1984  
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

AUG 15 1984

O.C.D.  
HOBBS OFFICE