

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form O-103
Revised 10-1-73

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease:
State ☒ Fee ☐

5. State Oil & Gas Lease No.
K-4670

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" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
AMOCO PRODUCTION COMPANY

3. Address of Operator
P. O. Box 68, Hobbs, NM 88240

4. Location of Well
UNIT LETTER **D** **710** FEET FROM THE **North** LINE AND **660** FEET FROM
THE **West** LINE, SECTION **19** TOWNSHIP **13-S** RANGE **33-E** N.M.P.M.

7. Unit Agreement Name

8. Field or Lease Name
State "DV"

9. Well No.
3

10. Field and Pool, or wildcat
Baum Upper Penn

15. Elevation (Show whether DF, RT, GR, etc.)
4296.1' 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 ☐
OTHER ☐

7. 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 10,000' and on 3-12-85 set 5 1/2", 17" x 15.5", K-55 csg and 17" x N-80 csg. Csg set at 10,000'. DV tool at 6722' and cemented with 600 sxs class H w/add., tailed in with 400 sxs class H w/add. Plug down 1:45 a.m. 3-12-85. Dropped bomb and opened DV tool, did not circulate cmt. Cemented 2nd stage with 800 sxs H lite w/add and tailed in with 400 sxs H neat. Plug down 8:25 a.m. 3-12-85 and circ 150 sxs.

045 NMCD, 1-JRB 1-FJN 1-GCC

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

SIGNED **Nancy C. Clark** TITLE **Asst. Admin. Analyst** DATE **3-13-85**

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

PROVED BY _____ TITLE _____ DATE **MAR 18 1985**

CONDITIONS OF APPROVAL, IF ANY: