| NO. OF COPIES RECEIVED |] - | | |
|---|---|--|--|
| DISTRIBUTION | | | Form C-103 Supersedes Old |
| SANTA FE | | CONCERVATION CONVICTION | C-102 and C-103 |
| FILE | | CONSERVATION COMMISSION | Effective 1-1-65 |
| U.S.G.S. | 4 | | For Indiana Trans (1 |
| | - | | Sa. Indicate Type of Lease |
| OPERATOR | | | State Fee X |
| |] | | 5. State Oil & Gas Lease No. |
| DO NOT USE THIS FORM FOR PR USE "APPLICAT | AND TICES AND REPORT | TS ON WELLS PLUG BACK TO A DIFFERENT RESERVOIR. FOR SUCH PROPOSALS.) | |
| I. OIL GAS GAS WELL | other- Wildcat | | 7. Unit Agreement Name |
| 2. Name of Operator | | | 8. Farm or Lease Name |
| Amarillo Oil Co 3. Address of Operator | • | | Howl |
| P.O. Box 151, A | 9. Well No. | | |
| 4. Location of Well | marillo, Texas 791 | | 1 |
| UNIT LETTER L | 660 FEET FROM THEWE | stLINE ANDFEE | 10. Field and Pool, or Wildcat |
| THE South LINE, SECTI | ON 22 TOWNSHIP | 35 RANGE 35E | мирм. |
| huuuuuuu | 15. Elevation (Show y | hether DF, RT, GR, etc.) | |
| GL 4,159 | | | 12. County Roosevelt |
| Check NOTICE OF II | Appropriate Box To Indic ITENTION TO: | ate Nature of Notice, Report of SUBSEQ | or Other Data UENT REPORT OF: |
| PERFORM REMEDIAL WORK | PLUG AND ABANDO | N REMEDIAL WORK | |
| TEMPORARILY ABANDON | | COMMENCE DRILLING OPNS. | ALTERING CASING |
| PULL OR ALTER CASING | CHANGE PLANS | CASING TEST AND CEMENT JOB | PLUG AND ABANDONMENT |
| | | OTHER | |
| OTHER | | _ [] | |
| 17. Describe Proposed or Completed Op work) SEE RULE 1103. | perations (Clearly state all pertine | ent details, and give pertinent dates, inc | luding estimated date of starting any proposed |
| to the surface. | H Cement with 2% Ca t Casing to 1,000# f | 0.D. 8RD Thd. 20# csg. lcium Chloride added. C or 30 minutes. Pressure | irculated 45 sx cement |
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| | | | |
| 18. I hereby certify that the information | above is true and complete to the | best of my knowledge and belief. | |
| | | | |
| SIGNED | | Production Superintende | ent DATE April 4, 1972 |
| | Outer Signed by | | |
| | D. Ramey | | APR 7 1972 |
| APPROVED BY | Dist. 1, Supv. | | DATE DATE (S// |

| APPROVED | 8Y | | | |
|----------|--------|-------------|--------|--|
| CONDITI | ONS OF | APPROVAL, 1 | F ANY: | |