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LAND OFFICE	
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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- DRILLING		7. Unit Agreement Name
2. Name of Operator Amoco Production Company		8. Farm or Lease Name SWEARINGEN
3. Address of Operator BOX 68, HOBBS, N. M. 88240		9. Well No. 1
4. Location of Well UNIT LETTER J 1650 FEET FROM THE SOUTH LINE AND 1980 FEET FROM THE EAST LINE, SECTION 19 TOWNSHIP 5-S RANGE 33-E NMPM.		10. Field and Pool, or Wildcat UNDESIGNATED
15. Elevation (Show whether DF, RT, GR, etc.) 4416' R.D.B.		12. County ROOSEVELT

16. 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 OPNS. <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.

On 2-11-72, 5 1/2" OD 14-17" J-55 & K-55 casing was set @ 8075' w/470 Sx CLASS H w/3/4 of 1% CFR-2. WOC for Appx. 48 hours. Tested casing w/2000 psi for 30 min. Test O.K. Commenced completion operations.

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

SIGNED _____ TITLE **AREA SUPERINTENDENT** DATE **FEB 24 1972**

On 2-NMOC-C-H
1- Div
APPROVED BY
1- PHILLIPS - ODessa
CONDITIONS OF APPROVAL, IF ANY:
ATTN: J.E. Wilson
1- RRY

Orig. Signed by
Joe D. Ramey
Dist. I, Supv.

TITLE _____ DATE **FEB 28 1972**