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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.
7. Unit Agreement Name
8. Farm or Lease Name <i>J.L. REED EST</i>
9. Well No. <i>1</i>
10. Field and Pool, or Wildcat <i>WILDCAT</i>
12. County <i>LEA</i>

## 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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <i>DRY HOLE</i>
2. Name of Operator <i>AMOCO PRODUCTION COMPANY</i>
3. Address of Operator <i>BOX 367, ANDREWS, TEXAS 79714</i>
4. Location of Well UNIT LETTER <i>J</i> <i>1980</i> FEET FROM THE <i>SOUTH</i> LINE AND <i>1980</i> FEET FROM THE <i>EAST</i> LINE, SECTION <i>3</i> TOWNSHIP <i>15-S</i> RANGE <i>35-E</i> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) <i>4000' GL</i>

### Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

#### NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

#### SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <i>Well Status</i> <input checked="" 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.

*(Formerly mid-west oil cap well)*

WELL STATUS: *TA*

DATE S-I on T-A: *10-26-62*

REASON: *Drilling well, objective horizon non productive.*

PLANS: *Evaluate re-entry. If not feasible P & A hole.*

*Expires 4/1/75*

PROJECTED DATE: *March, 1975*

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

SIGNED *Joe D. [Signature]* TITLE ADMINISTRATIVE ASSISTANT DATE *OCT 21 1974*

APPROVED BY *2-NMOC-N 1-DIV 1-5-3 1-22* CONDITIONS OF APPROVAL, IF ANY: *None*