NO. OF COPIES RECEIVED	¬	
DISTRIBUTION		Form C-103 Supersedes Old
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	C-102 and C-103
FILE		Effective 1-1-65
U.S.G.S.		5a. Indicate Type of Lease
LAND OFFICE		State Fee
OPERATOR		5, State Oll & Gas Lease No. 4-3556
USE "APPLICA	RY NOTICES AND REPORTS ON WELLS ROPOSALS TO DAILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. TION FOR PERMIT - (FORM C-101) FOR SUCH PROPOSALS.)	
OIL GAS WELL	OTHER-	7. Unit Agreement Name
2. Name of Operator  AMGCO PRODUCTION COI	MPANY	8. Farm or Lease Name
3, Address of Operator BOX 367, ANDREWS,	TEXAS 79714	9. Well No.
4. Location of Well UNIT LETTER	1980 FEET FROM THE SOUTH LINE AND 1980 FEE	10. Field and Pool, or Wildcat
1	10N 25 TOWNSHIP 18-S RANGE 34-E	NMPM.
mmmmmmm	15. Elevation (Show whether DF, RT, GR, etc.)	
	3986 R. D.B.	12. County
Check NOTICE OF II	Appropriate Box To Indicate Nature of Notice, Report of NTENTION TO: SUBSEQ	or Other Data UENT REPORT OF:
PERFORM REMEDIAL WORK  TEMPORARILY ABANDON  PULL OR ALTER CASING	PLUG AND ABANDON REMEDIAL WORK  COMMENCE DRILLING OPNS.  CHANGE PLANS CASING TEST AND CEMENT JOS.	ALTERING CASING  PLUG AND ABANDONMENT
CTHER	OTHER CONTYPLECT	or aperuions
17. Describe Proposed or Completed Opwork) SEE RULE 1103.	perations (Clearly state all pertinent details, and give pertinent dates, inc	luding estimated date of starting any propos
orilled to a	TD of 13489 and evaluated	Marrow. no oil
Wolflemp: F. W/ B500 gel B	erforated interval 10624-56' W/	25SPF. acidized

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

SIGNED XOYX MOUNT TITLEDMINISTRATIVE ASSISTANT

DATE

OUZ. NINCON HOUSE

1- DIV

APPROVED BY

1- SUSC

CONDITIONS OF APPROVAL, IF ANY:

1- PRU

8- METHER: