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LAND OFFICE	
OPERATOR	

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 checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. B-7428-2
7. Unit Agreement Name
8. Farm or Lease Name STATE CV
9. Well No. 5
10. Field and Pool, or Wildcat VACUUM Abo Reef
12. County LEA

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator AMOCO PRODUCTION COMPANY
3. Address of Operator BOX 68, HOBBS, N. M. 88240
4. Location of Well UNIT LETTER F 2310 FEET FROM THE NORTH LINE AND 1650 FEET FROM THE WEST LINE, SECTION 25 TOWNSHIP 17-S RANGE 35-E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3919' R.D.B.

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 checked="" 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 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.

In an effort to increase productivity
remedial work performed as follows:

Pulled bridge plug that was set @ 8787'
and are producing all opened intervals.

TD- 8894'

PBD- 8787'

PERFS: 8667-8753', 8826-34', 40-50', 73-89'.

OC- 3-1-71

Comp- 3-5-71

Prior. Pmp 130 + 13W 24 hrs.

After. Pmp 5430 + 150 BW - -

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

SIGNED _____	AREA SUPERINTENDENT TITLE _____	DATE MAR 5 1971
APPROVED BY 012. NMOC-14 CONDITIONS OF APPROVAL, IF ANY: 1- SUSP	SUPERVISOR DISTRICT TITLE _____	DATE MAR 8 1971

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MAR 8 1971

OIL CONSERVATION COMM.
HOBBS, N. M.