NO. OF COPIES RECEIVED		
DISTRIBUTION		Form C-103
SANTA FE	NEW MENIOD ON DOWNERS	Supersedes Old C-102 and C-103
FILE	NEW MEXICO OIL CONSERVATION COMMISSION	Effective 1-1-65
U.S.G.S.	· ·	
LAND OFFICE	-	5a. Indicate Type of Lease
		State Fee
OPERATOR		5. State Oil & Gas Lease No.
		A-1212-
SUND OD NOT USE THIS FORM FOR B	DRY NOTICES AND REPORTS ON WELLS	
USE "APPLIC	ATION FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.)	
OIL SAS	•	7. Unit Agreement Name
WELL WELL	OTHER-	
2. Name of Operator	Company	8. Farm or Lease Name
Amoco Production	Company	Sa Habbe 168A
3. Address of Operator	10 TEVAO 70714	9, Well No.
BOX 367, ANDREW	75, TEXAS /9/14	1/00
4. Location of Well		10. Field and Pool, or Wildcat
UNIT LETTER	330 FEET FROM THE NORTH LINE AND 2310 FEET FRO	Halda CCA
		· Hobbs - 65 A-
L WEST	TION 15 TOWNSHIP 19-5 RANGE 38-E NMP	
LINE, SECT	TION TOWNSHIP RANGE NMP	~ (
	15. Elevation (Show whether DF, RT, GR, etc.)	
	3593 D F	12 County
16.		11111111 A3AL
Check	Appropriate Box To Indicate Nature of Notice, Report or O	ther Data
NOTICE OF		NT REPORT OF:
	<u> </u>	
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	THE AND ABANDONMEN!
		ATUS K
OTHER		
10.0		
work) SEE RULE 1103.	Operations (Clearly state all pertinent details, and give pertinent dates, includin	ng estimated date of starting any proposed
WELL STATUS	· CH = in	
WELL SIATOS		10 10
•	expire.	0 10-1-76
DATE SI OR TA	8-66	
_		`
Reason: U	2 1 2	
resourc.	reconericas 40 produce.	
ΛΛ		•
Plano: W.	ell to be converted to	·
	400	
D.A. 0	0.4.	•
Daxe of MO &	PKA: December 1975	
0		
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	•	
		•
\wedge		
18. I hereby certify that the information	n above is true and complete to the best of my knowledge and belief.	
, young me anormation	. cooks to true and complete to the best of my knowledge and belief.	× *
45141	AITALL. TRANSCEDATINE ASSISTANT	000 - 0 4000
SIGNED X	FORKUM TITLE ADMINISTRATIVE ASSISTANT	_ SEP 3 0 1975
1 200	by	
(/	in the second se	

CONDITIONS OF APPROVAL, IF ANY: