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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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- <u>DUAL COMPLETED</u>		7. Unit Agreement Name
2. Name of Operator <u>AMOCO PRODUCTION COMPANY</u>		8. Farm or Lease Name <u>OWEN B</u>
3. Address of Operator <u>P.O. DRAWER A, LVEVLLAND, TEXAS 79336</u>		9. Well No. <u>2</u>
4. Location of Well UNIT LETTER <u>L</u> <u>1980</u> FEET FROM THE <u>SOUTH</u> LINE AND <u>440</u> FEET FROM THE <u>WEST</u> LINE, SECTION <u>34</u> TOWNSHIP <u>21-S</u> RANGE <u>37-E</u> NMPM.		10. Field and Pool, or Wildcat <u>DRINKARD-TUBB</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>3458' DF</u>		12. County <u>LEA</u>

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 checked="" 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 JOB <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.

Propose to abandon Drinkard zone 6382'-6582' by plugging off packer set at 6360' and produce from the Tubb zone 6070'-6344' only as a single completion gas well.

T.D. 6595'
P.BTD 6592'

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

SIGNED <u>Ray W. Cox</u>	TITLE <u>Administrative Assistant</u>	DATE <u>8/12/76</u>
APPROVED BY <u>Jerry [unclear]</u>	TITLE _____	DATE _____
1-2 NMCC - H 1-DIV 1-SUSP 1-RC	CONDITIONS OF APPROVAL, IF ANY:	