

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☐ Fee ☒
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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator Amoco Production Company	8. Farm or Lease Name McQuatters
3. Address of Operator P. O. Box 68 Hobbs, NM 88240	9. Well No. 4
4. Location of well UNIT LETTER <u>A</u> <u>860</u> FEET FROM THE <u>North</u> LINE AND <u>810</u> FEET FROM THE <u>East</u> LINE, SECTION <u>11</u> TOWNSHIP <u>21-S</u> RANGE <u>36-E</u> N.M.P.M.	10. Field and Pool, or Wildcat Und. Hardy Drinkard X Blinebry
11. Elevation (Show whether DF, RT, GR, etc.) 3533.2 GL	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input 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 JOB <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 dual complete per the following procedure: Pull tubing and packer. Run long string of 2-3/8 tubing, and packer. Packer will be set at approx. 6450'. Run short string of 2-3/8 tubing. Install surface equipment. Will swab Blinebry side to return to testing.

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

SIGNED Bob Davis TITLE Admin. Analyst DATE 4-21-80

Orig. Signed by
Jerry Sexton

APPROVED BY Dist 1, Supv. TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

APR 22 1980