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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 [X] Fee [ ]

5. State Oil & Gas Lease No.: LG - 286

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.)

OIL WELL [ ] GAS WELL [X] OTHER-

7. Unit Agreement Name:

2. Name of Operator: Amoco Production Company

8. Farm or Lease Name: State GA

3. Address of Operator: P. O. Box 68, Hobbs, NM 88240

9. Well No.: 1

4. Location of Well: UNIT LETTER K, 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 13 TOWNSHIP 23-S RANGE 34-E NMPM.

10. Field and Pool, or Wildcat: Und. Antelope Ridge Morro

15. Elevation (*Show whether DF, RT, GR, etc.*): 3359 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	[ ]	PLUG AND ABANDON	[ ]	REMEDIAL WORK	[ ]	ALTERING CASING	[ ]
TEMPORARILY ABANDON	[ ]			COMMENCE DRILLING OPNS.	[X]	PLUG AND ABANDONMENT	[ ]
PULL OR ALTER CASING	[ ]	CHANGE PLANS	[ ]	CASING TEST AND CEMENT JOB	[X]		
OTHER	[ ]			OTHER	[ ]		

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.

On 2-28-80 Warton Drilling Co. (Rig #3) spudded a 26" hole at 12:00 Noon. Drilled to a TD of 737' and ran 20" casing set at 737'. Cemented with 850 SX Class C cement with 2% CACL. Circulated 50 SX. Plugged down 3:25 AM 3-2-80. WOC 18 hrs. Tested casing with 1000# for 30 min. Test OK. Reduced hole to 17-1/2" and resumed drilling.

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

SIGNED Bob Davis TITLE Asst. Admin. Analyst DATE 3-11-80

APPROVED BY Orig. Signed by John Runyan Geologist TITLE _____ DATE MAR 13 1980

CONDITIONS OF APPROVAL, IF ANY:

O+4 NMOCD-H 1-HOU 1-Susp 1-BD