NOF CORREC RECEIVED	
SANTA FE NEW MEXICO OIL CONSERVATION COMPASSION	Form C-103 Supersedes Old
SANTA FE NEW MEXICO OIL CONSERVATION CONSERVATION	C-102 and C-103
FILE DEC 2 10	Effective 1-1-65
U.S.G.S. DEC 3 12 53 711 165	
LAND OFFICE	5a. Indicate Type of Lease
OPERATOR	State Fee)
	5. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS	
SUNDRY NOTICES AND REPORTS ON WELLS USE "AFPLICATION FOR FERMIT -" (FORM C-101) FOR SUCH PROPOSALS.) 1.	
WELL GAS WELL OTHER.	7. Unit Agreement Name
2. Name of Cherator	
Amerada Petroleum Corporation	E. Form or Lease Name
3. Address of Operator	W. F. Stuart
P. O. Box 668 - Hobbs, New Mexico	c. Well No.
4. Location of hell	1
UNIT LETTER F 2310 FEET FROM THE West LINE AND 1650 FEET	10. Field and Pool, or Wildcat
FEET FROM THE NEST LINE AND 1650 FEET	Justis Blinebry
THE North LINE, SECTION 14 TOWNSHIP 25S RANGE 37E N	NEM ALLEN AND AND AND AND AND AND AND AND AND AN
15. Elevation (Show whether DF, RT, GR, etc.)	
	12. County
3126° DF	Lea ()
Check Appropriate Box To Indicate Nature of Notice, Report or	Other Data
NOTICE OF INTENTION TO:	ENT REPORT OF:
	ENT REPORT OF:
PERFORM PEMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	
TEMPCRAFILY ASANDON	ALTERING CASING
PULL OR ALTER CASING CHANGE PLANS CASING TEST AND SEMENT JOB	PLUG AND ABANDONMENT
CTHER	_
OTHER	
7. Describe Proposed or Commissed On 1997	
7. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, include work) SEE RULE 1103.	ding estimated date of starting any proper-
	y starting any propose
D-11.1.1.1.	

Pulled tubing and packer. Ran 3-1/2" OD tubing and packer. Sand oil fraced 5-1/2" casing perfs. from 5171' to 5660' in 3 stages with a total of 37,800 gals. refined oil and 36,100# 20-40 sand. Tested. Pulled 3-1/2" OD tubing and packer. Ran 2-3/8" OD tubing and packer and resumed production.

Test Prior to Workover 11-22-65:

			An On	1/2" c	hoke.	TP O to	00#.	Flowing by heads.
8 Hrs.	er Workover 1	1-29-65: BO & 3.88 BS	5W on 20	0/6/."				Vol. 187,555 CFPD.
I hereby centify t	that the information ab	ove is true and compl	ete to the b	est of my	knowledg	e and belief.		
NED CONTRACTOR	11,		TITLE	Asst.	Dist.	Supt.		EATE 11-30-65
ROVED	PROVAL, IF ANY:		TITLE_					PATE