

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-103
Revised 10-1-78

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input type="checkbox"/>
2. Name of Operator Amoco Production Company		5. State Oil & Gas Lease No.
3. Address of Operator P. O. Box 68 Hobbs, NM 88240		7. Unit Agreement Name
4. Location of well UNIT LETTER A 660 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE, SECTION 16 TOWNSHIP 19-S RANGE 32-E NMPM.		8. Farm or Lease Name State DR
		9. Well No. 3
		10. Field and Pool, or Wildcat East Lusk Wolfcamp
15. Elevation (Show whether LF, RT, GR, etc.)		12. County Lea

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

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

Moved in service unit 12-6-80. Pull rods and pump. Ran 2-3/8" and 2-7/8" tubing and treating packer. Set packer at 10650'. Acidized with 1000 gallons 15% NE HCL and flushed with 54 bbls. of water. Swabbed back load. Returned well to production.

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

SIGNED Greg Mitchell TITLE Assist. Admin. Analyst DATE 1-27-81

APPROVED BY [Signature] TITLE [Signature] DATE JAN 29 1981

CONDITIONS OF APPROVAL, IF ANY:

0-4-NMOCD, H

1-HOU

1-GDM

1-CLERK