

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION
P.O. Box 2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.
30-025-31211

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

South Hobbs GSA Unit

8. Well No.
225

9. Pool name or Wildcat
Hobbs Grayburg San Andres

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. Type of Well

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Amoco Production Company

(Rm 17.182)

3. Address of operator

P.O. Box 3092, Houston, Texas 77253-3092

4. Well Location SL/BHL

Unit Letter M : 541/5 Feet From The West Line and 647/683 Feet From The South Line

Section 34/33 Township T-18-S Range R-38-E NMPM Lea, NM County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3620.2 GL

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: Squeeze Zone / Reperf / Acidize ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. 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.

See attached proposal.

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

SIGNATURE Devina M. Prince TITLE Staff Assistant DATE 06-25-93

TYPE OR PRINT NAME Devina M. Prince TELEPHONE NO. (713) 596-7686

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

JUL 01 1993

RECEIVED

APR 21 1993

100-2585

100-2585

Purpose: To squeeze off Zone I leaking perfs and reperforate Zone II/
III

PROCEDURE

1. MI. RUSJ.
2. POH x RxPmpxBtg.
3. Isolate "squeezed Zone I" perfs 4056-4092. If leaking, follow procedure as follows. (If perfs are not leaking, get with engineer about)
4. Set CIBP x sand at 4105'.
5. Squeeze Zone I perfs 4056-4092.
 - a. Set pkr x 4000' x establish inj rate.
 - b. Set Cmt Ret x 4000'.
 - c. Sq x lead of Class C x 2% CaCl x 2#/sx TuffPlug (200 sxs)
 - d. Follow x (150 sxs) Class C cmt x .5-.6% control fluid loss (D-127) x .2% Defoamer.
 - e. Volumes x % are to be decided at Dowell test location x at squeeze location as necessary. Not to be pumped over 2 bpm.
Max sqz psi: 2000-2500 psi.
6. WOC. DO cmt x CIBP.
7. Test csg.
8. RIH x pkr x SA 4105'.
9. Acd pay x 5000 gal 20% NE HCl containing 2 gal/1000 gal WA-211 x 2 gal/1000 gal WA-212. Pump in 3 stages as follows:
 - 1500 gal ACD
 - 500 # Rock Salt
 - 1500 gal ACD
 - 700 # Rock Salt
 - 2000 gal ACD Pump at 5 bpm x limit press to 2000 PSI above RFC opening.
10. Flush to perfs x 75 bbls clean water.
11. Release PKR x POH.
12. RIH x prod eqpt x return well to prod.
13. Pump scale squeeze to inhibit scale formation.

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JUN 27 1933

SHRS
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