

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.O.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 type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER: Injection	7. Unit Agreement Name
2. Name of Operator Amoco Production Company	8. Name of Lease Name South Hobbs (GSA) Unit
3. Address of Operator P. O. Box 68 Hobbs, NM 88240	9. Well No. 49
4. Location of Well UNIT LETTER I , 1980 3300 FEET FROM THE South North LINE AND 1293 FEET FROM THE East LINE, SECTION 3 TOWNSHIP 19-S RANGE 38-E NMPM.	10. Field and Pool, or Wildcat Hobbs GSA
15. Elevation (Show whether OF, RT, GR, etc.) 3615' KB	12. County Lea

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" 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 estimates date of starting any proposed work) SEE RULE 1103.

Well was acidized 8-18-80 by the following procedure:

First stage pumped 400# salt and 400# paraformaldehyde in 400 gallons 30# gelled brine. Pumped 1250 gallons 15% NE acid and flushed with 25 bbls. saturated brine. Second stage pumped 300# salt and 300# paraformaldehyde in 400 gallons 30# gelled brine. Pumped 1250 gallons 15% NE acid and flushed with 25 bbls. saturated brine. Third stage pumped 300# salt and 300# paraformaldehyde in 400 gallons 30# gelled brine. Pumped 1250 gallons 15% NE acid and flushed with 25 bbls. saturated brine. Fourth stage pumped 350# salt and 350# paraformaldehyde in 400 gallons 30# gelled brine. Pumped 1250 gallons 15% NE acid and flushed with 25 bbls. saturated brine. Returned well to injection at 300 BWPD and on vacuum.

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

SIGNED *C. M. K. [Signature]* TITLE Asst. Admin. Analyst DATE 8-22-80

APPROVED BY *[Signature]* TITLE DATE AUG 25 1980

CONDITIONS OF APPROVAL, IF ANY:

0+4-NMOCD, H

1-Hou

1-Susp

1-MKE