

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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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 OPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT - I" (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. Farm or Lease Name South Hobbs (GSA) Unit
3. Address of Operator P. O. Box 68 Hobbs, NM 88240	9. Well No. 33
4. Location of Well UNIT LETTER <u>G</u> <u>2310</u> FEET FROM THE <u>North</u> LINE AND <u>1650</u> FEET FROM <u>East</u> THE <u>4</u> LINE, SECTION <u>19-S</u> TOWNSHIP <u>38-E</u> RANGE <u>NMPM.</u>	10. Field and Pool, or Wildcat Hobbs (GSA)
15. Elevation (Show whether DF, RT, GR, etc.)	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 checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

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.

Workover for subject well approved 6-30-80. Propose to do additional work as follows:

Run casing perforator into 4-1/2" liner and perforate 4006'-4021' and 4040'-4066' with 2 SPF. Stimulate well as proposed 6-30-80. Return well to injection.

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

SIGNED Marly Koto TITLE Assist. Admin. Analyst DATE 10-2-80

APPROVED BY John R. ... TITLE Geologist DATE 10-2-80

CONDITIONS OF APPROVAL, IF ANY: 0+4-NMOCD, H 1-Hou 1-Susp 1-MKE