

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

Form C-103
Revised 10-1-73

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FILE		
U.S.G.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. ☒ OIL WELL ☐ GAS WELL ☐ OTHER-	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 4072, Odessa, Texas 79760	9. Well No. 144
4. Location of Well SL/BHL UNIT LETTER <u>M/N</u> <u>580/1316</u> FEET FROM THE <u>South</u> LINE AND <u>755/1337</u> FEET FROM THE <u>West</u> LINE, SECTION <u>3</u> TOWNSHIP <u>19-S</u> RANGE <u>38-E</u> NMPM.	10. Field and Pool, or Wildcat Hobbs GSA
15. Elevation (Show whether DF, RT, GB, etc.) 3609.6' GL	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 ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☒	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	

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 1703.

Workover to perforate past barium sulfate scale buildup and acidize. MI and RUSU 8-11-87 and pull rods, pump and tubing. Run casing gun and perforate from 4300-04, 4306-08, 4312-14, 4320-26, 4336-42, 4350-52, 4356-59, 4363-66 and 4368-72 with 4 JSPF. Run PPIP and acidize perforations with 3200 gallons 20% NE HCl and 100 gal/ft on 2 foot spacing. Pull tubing and packer. Run tubing, rods and pump. RD and MOSU. Return to production.

PPWO: 42 BOPD, 338 BWPB, 0 MCF
PAWO: 40 BOPD, 558 BWPB, 0 MCF

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

SIGNED O. M. Mitchell TITLE Sr. Admin. Analyst DATE 8-20-87

O. M. Mitchell
Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE AUG 24 1987

CONDITIONS OF APPROVAL, IF ANY: