

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.G.S.	
LAND OFFICE	
OPERATOR	

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

Form O-103
Revised 10-1-77

14. Indicate Type of Lease
State Fee

15. 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-LIT (FORM O-101) FOR SUCH PROPOSALS.)

1. OIL WELL GAS WELL OTHER- **Injection**

2. Name of Operator
Amoco Production Company

3. Address of Operator
P. O. Box 68 Hobbs, NM 88240

4. Location of Well
UNIT LETTER **E** **1978** FEET FROM THE **North** LINE AND **1223** FEET FROM
THE **West** LINE, SECTION **10** TOWNSHIP **19-S** RANGE **38-E** N.M.P.M.

7. Unit Agreement Name
South Hobbs (GSA) Unit

8. Form or Lease Name
South Hobbs (GSA) Unit

9. Well No.
173

10. Field and Pool, or Wildcat
Hobbs GSA

11. Elevation (Show whether DF, RT, GR, etc.)
3604' 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 <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input checked="" 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"/>	OTHER _____ <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 1105.

Propose to amend hole size on 10-3/4" surface casing from 14-1/4" to 14-3/4"

0+5 NMOCD, H 1-J. R. Barnett, Hou 1-F. J. Nash, Hou 1-GCC 1-Shell 1-Texaco 1-Sun 1-Petro

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

SIGNED *Harry C. Clark* TITLE Asst. Admin. Analyst DATE 6-1-84

ORIGINAL SIGNED BY **TERRY SEXTON**
DISTRICT 1 SUPERVISOR

APPROVED BY _____ TITLE _____ DATE JUN 5 1984

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

JUN 4 1984

O.C.D.
HOBBS OFFICE