

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

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
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 REPERFORATE OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE APPLICATION FOR PERMIT - C (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL ☐ GAS WELL ☒ CO2 OTHER-

1. Name of Operator

Amoco Production Company

2. Address of Operator

P. O. Box 68, Hobbs, NM 88240

3. Location of Well

UNIT LETTER G 1980 FEET FROM THE North LINE AND 1980 FEET FROM
THE East LINE, SECTION 9 TOWNSHIP 20-N RANGE 34-E NMPM.

7. Unit Agreement Name

8. Form or Lease Name

Jackard D

9. Well No.

1

10. Field and Pool, or Wildcat

Und. Tubb

15. Elevation (Show whether DF, RT, GR, etc.)

4840 GL

12. County

Union

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 ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

PULL OR ALTER CASING ☐

CHANGE PLANS ☐

CASING TEST AND CEMENT JOBS ☐

OTHER ☐

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.

Moved in completion unit 3-27-81. Perforated 2236'-70', 2274'-89', 2290'-2322', 2330'-44', 2354'-58', 2366'-81', 2388'-92', 2394'-97', 2399'-2408', 2416'-61', 2464'-76', 2487'-93' with 1 JSPF. Acidized with 2000 gal. 7-1/2% HCL acid. Flow tested thru a separator for 120 hrs. at an average of 992 MCFD. Shut well in 4-6-81.

0+2-NMOCD, SF 1-Hou 1-Susp 1-ED

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

SIGNED Bob Shurs

TITLE Admin. Analyst (SG)

DATE 4-8-81

APPROVED BY Carl Ulvog
CONDITIONS OF APPROVAL, IF ANY:

TITLE ADMINISTRATIVE SUPERVISOR

DATE 4/16/81