

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2038
SANTA FE, NEW MEXICO 87501

Form O-103
Revised 10-1-73

5a. Indicate Type of Lease	
State ☐	Fed ☒
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 - 1 (FORM C-101) FOR SUCH PROPOSALS.)

6. OIL ☒ GAS ☐ OTHER ☐		7. Unit Agreement Name
8. Name of Operator AMOCO PRODUCTION COMPANY		8. Name of Lease South Hobbs (GSA) Unit
9. Address of Operator P. O. Box 68, Hobbs, NM 88240		9. Well No. 48
10. Location of Well UNIT LETTER <u>J</u> <u>3300</u> FEET FROM THE <u>North</u> LINE AND <u>2310</u> FEET FROM THE <u>East</u> LINE, SECTION <u>3</u> TOWNSHIP <u>19-S</u> RANGE <u>38-E</u> NMPM.		10. Field and Pool, or offset Hobbs - GSA
11. Elevation (Show whether DF, RT, GR, etc.) 3619' DF		12. County Lea

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

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
FULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	OTHER ☒ Acid job

7. 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.

MISU 2-11-85, killed well and POH with production equipment. RIH with spgr, set at 4197'. Ran GR/CCl Log. Acidized open hole 4197-4235' with 1500 gals 15% gelled acid w/add. Flushed with 25 bbls brine. POH. RIH with tbg and ESP. ESP landed at 4023'. MOSU 2-14-85 and began pump testing 2-15-85. Pump tested 7 days, last 24 hrs pumped 24 BO, 568 BO, and 23 MCF. Well is currently producing, operations completed 2-22-85

0+5 NMOC, H 1-JRB 1-FJN 1-GCC

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

SIGNED Gary C. Clark TITLE Asst. Admin. Analyst DATE 3-2-85

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

PROVED BY _____ TITLE _____ DATE MAR - 5 1985

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

MAR - 4 1985

O.C.A.
HOME OFFICE