

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.
30-025-07607

5. Indicate Type of Lease
STATE FEE

6. State Oil & Gas Lease No.
015497

7. Lease Name or Unit Agreement Name
South Hobbs (GSA) UNIT

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. Type of Well:
OIL WELL GAS WELL OTHER WATER INJECTION

2. Name of Operator
Amoco Production Company

8. Well No.
45

3. Address of Operator
P.O. 3092 Houston, TX 77253

9. Pool name or Wildcat
Hobbs GSA

4. Well Location
Unit Letter **I** : 1980 Feet From The South Line and 660 Feet From The EAST Line
Section 4 Township 19-S Range 38-E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3614' DF

11. 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"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: _____ <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: _____ <input type="checkbox"/>

12. 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. NOTICE OF INTENTION TO: MI RUSK AND POH INS, EQUIP. WITH W/TBG AND CMT RETAINER ABOVE LINER TOP, CEMENT SQUEEZE EXISTING PERFS. SHUT DOWN 18hrs FOR CMT TO SET. DRILL-OUT CMT AND PRESSURE TEST SQUEEZE. REPERF. FROM 4078' - 4190'. ACIDIZE PERFS. FLUSH W/50 BBL WATER X POH. TEST WELL TO INJECTION. EST. COMMENCEMENT OF OPERATIONS: UPON APPROVAL OF C-103

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

SIGNATURE B. T. Steele TITLE Admin. ANALYST DATE 1-20-89

TYPE OR PRINT NAME Blake T. STEELE TELEPHONE NO. 713-584-732

(This space for State Use)

Orig. Signed by
Paul Kautz
Geologist

JAN 25 1989

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

100-100-100

100-100-100

RECEIVED

JAN 24 1989

**OCD
HOBBS OFFICE**