

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

Form C-103
Revised 10-1-73

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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 DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL ☐ GAS WELL ☐ OTHER- INJECTION

7. Unit Agreement Name

Name of Operator
AMOCO PRODUCTION COMPANY

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

Address of Operator
P.O. BOX 68 HOBBS, NEW MEXICO 88240

9. Well No.
30

Location of well
UNIT LETTER H 1980 FEET FROM THE North LINE AND 660 FEET FROM
THE East LINE, SECTION 5 TOWNSHIP 19-S RANGE 38-E N.M.P.M.

10. Field and Pool, or Wildcat
Hobbs GSA

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

12. County
LEA

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 ☐	OTHER <u>Convert to Injection</u> ☒

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 4-9-85 and POH w/ production equipment. Plugged back to 4056' w/ Sand and calseal. Spot 250 gal 15% HCL at 4054 and establish injection rate. Ran cmt ret and SA 3939'. Pumped 40 SX class "C" cmt. w/ 12 SX on top of ret. RIH w/ 4-3/4" bit and DO to 4056'. Prs tested to 750 psi and bled off. to 0 psi in 1 min. Ran gamma ray CCL and perfed San Andies interval 4122'-72' non-continuous w/ 4 JSPP w/ 3 1/8" csg gun. Ran 5-1/2" pkr and SA 4113'. Acidized w/ 5000 gal. 15% NE HCL w/ additives, Rel pkr and POH. RIH w/ plastic coated pkr and plastic coated tbq. PSA 3869'. Loaded backside

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

SIGNED [Signature] TITLE Administrative Analyst

DATE 29 APRIL 1985

APPROVED BY [Signature] DISTRICT SUPERVISOR

TITLE

DATE MAY 1 1985

CONDITIONS OF APPROVAL, IF ANY:

0+5 NMOCD-H. 1-JRB. 1-FJN. 1-NLG. 1-ARCO

with 65 bbl. pkr fluid. Tested to 500 psi - OK. MOSU 4-23-85.
Commenced injection 4-23-85 at 1000 BWPD on vac.