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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

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 TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL GAS WELL OTHER- Injection

Name of Operator
Amoco Production Company

Address of Operator
P.O. Drawer "A" Levelland, Texas 79336

Location of Well
UNIT LETTER M 585 FEET FROM THE South LINE AND 710 FEET FROM
West THE LINE, SECTION 3 TOWNSHIP 19-S RANGE 38-E N.M.P.M.

7. Unit Agreement Name

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

9. Well No.
112

10. Field and Pool, or Wildcat
Hobbs

15. Elevation (Show whether DF, RT, GR, etc.)
3614 RDB

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 checked="" 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 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 1103.

Propose to increase injection by acidizing zones I,II,III. Each zone will be acidized individually using a ret. bridge plug and packer to seperate the zones. A total of 5500 gal. 20% HCL acid with graded rock salt as a diverting material between stages will be used.

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

SIGNED Dennis Ewomb TITLE Asst. Admn. Analyst DATE 10-18-78

APPROVED BY [Signature] TITLE _____ DATE OCT 23 1978

CONDITIONS OF APPROVAL, IF ANY
0+4 - NMOCC-H 1 - SUSP 1 - REG 1 - DE