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LAND OFFICE	
OPERATOR	

3a. Indicate Type of Lease
State ☐ Fee ☒
3. State Oil & Gas Lease No.

SUNDARY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG WELLS TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. ☐ OIL WELL ☐ GAS WELL ☒ OTHER: <u>Water Injection</u>	7. Unit Agreement Name
2. Name of Operator <u>AMOCO PRODUCTION COMPANY</u>	8. Farm or Lease Name <u>South Hobbs (GSA) Unit</u>
3. Address of Operator <u>P. O. BOX 3092; HOUSTON, TEXAS 77253</u>	9. Well No. <u>121</u>
4. Location of Well UNIT LETTER <u>E</u> , <u>1450</u> FEET FROM THE <u>North</u> LINE AND <u>150</u> FEET FROM THE <u>West</u> LINE, SECTION <u>4</u> TOWNSHIP <u>19-S</u> RANGE <u>38-E</u> N.M.P.M.	10. Field and Pool, or wildcat <u>Hobbs GSA</u>
11. Elevation (Show whether DF, RT, GR, etc.) <u>3625' KB</u>	12. County <u>Lea</u>

10. 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 OPER. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	

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.

MI and RUSU 7-28-88, release packer and pull injection tubing. Run bit and tag at 4210'. Run packer and set at 3883'. Acidize from 4056' to 4192' with 4900 gallons of 15% NE HCl. Run injection packer and tubing and displace hole with packer fluid. Set packer at 3822' and test to 550 psi. RD and MOSU 7-31-88 and return well to injection.

IPWO: 1800 BWIPD at 700 psi.
IAWO: 2510 BWIPD at 0 psi.

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

Signed Maurice Mitchell TITLE Sr. Admin. Analyst DATE 10-6-88

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: