

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

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

Form C-103
Revised 10-1-7

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
H-1212-1

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. OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. Unit Agreement Name
2. Name of Operator AMOCO PRODUCTION COMPANY	8. Farm or Lease Name <u>South Hobbs (GSA) Unit</u>
3. Address of Operator P.O. BOX 68 HOBBS, NEW MEXICO 88240	9. Well No. <u>124</u>
4. Location of Well UNIT LETTER <u>J</u> <u>1925</u> FEET FROM THE <u>South</u> LINE AND <u>2380</u> FEET FROM THE <u>East</u> LINE, SECTION <u>4</u> TOWNSHIP <u>19-S</u> RANGE <u>38-E</u> NMPM.	10. Field and Pool, or Wildcat <u>Hobbs GSA</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>3609.1' GL</u>	12. County <u>Lea</u>

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

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

SUBSEQUENT REPORT OF:
REMEDIAL WORK ☒
COMMENCE DRILLING OPS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐
OTHER ☐

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.

MISU 9-26-85 and POH with production equipment. Ran pin point injection packer and acidized gross intervals 4136-4195' in 2 ft. setting with a total of 1225 gals 15% NEFE HCl acid. Re-ran production equipment. MISU 9-30-85 and returned to production. Operations completed 10/12/85. PAWD: 76 BOPD x 485 BWPD x 41 MCFD.

045 NMOCD, H 1-JRB 1-FJN 1-CMH
18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNED Charles M. Lanning TITLE Administrative Analyst (SG) DATE 10/16/85
ORIGINAL SIGNED BY JERRY SEXTON
APPROVED BY DISTRICT SUPERVISOR TITLE _____ DATE OCT 17 1985
CONDITIONS OF APPROVAL, IF ANY: