

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-103
Revised 10-1-7

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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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <u>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 68, Hobbs NM 88240</u>	9. Well No. 182 <u>182</u>
4. Location of Well UNIT LETTER <u>F</u> <u>1785</u> FEET FROM THE <u>North</u> LINE AND <u>1810</u> FEET FROM THE <u>West</u> LINE, SECTION <u>5</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>3621.1 GR</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 Change Name

PLUG AND ABANDON
CHANGE PLANS

SUBSEQUENT REPORT OF:

REMEDIATION WORK
COMMENCE DRILLING OPNS.
CASING TEST AND CEMENT JOBS
OTHER

ALTERING CASING
PLUG AND ABANDONMENT

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 1503.

This is to inform you that the McKinley #20 has been re-named SHU # ~~182~~ 182

0+5 NMOCB, H 1-J.R. Barnett, Hon 1-F.J. Nash, Hon 1-GCC 1-TEXACO 1-Sun 1-Shell 1-Retro Service 1-Arco

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

SIGNED Mary C. Clark TITLE Asst. Admin. Analyst DATE 11-14-84

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON TITLE DISTRICT 1 SUPERVISOR DATE NOV 19 1984
CONDITIONS OF APPROVAL, IF ANY: