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SANTA FE	
FILZ	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

3a. 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 GAS WELL OTHER

2. Name of Operator
AMOCO PRODUCTION COMPANY

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

4. Location of Well
UNIT LETTER SL/BHL H 1790/1400 FEET FROM THE North LINE AND 1185/1236 FEET FROM East LINE, SECTION 4 TOWNSHIP 19-A RANGE 38-E N.M.P.M.

7. Unit Agreement Name

8. Form of Lease Name
South Hobbs (GSA) Unit

9. Well No.
132

10. Field and Pool, or Wildcat
Hobbs GSA

15. Elevation (Show whether DF, RT, GR, etc.)
3614.9' GR

17. County
Lea

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

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 perform the following work to reduce water production:

1. Move in service unit and pull out of hole w/ rods, pump, and tubing;
2. Run in hole w/ Cast iron bridge plug x set at 4248'. Cap Cast iron bridge plug w/ 5" Cal-Seal.
3. Re-run 2 7/8" tubing, rods, x pump.
4. Move out service unit and install pumping equipment x place well back on production.

O+5: NMOC-D-HOBBS; 1-J.R.BARNETT HOU RM. 21.156; 1-F.J.NASH HOU RM. 4.206; 1-BAO

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

SIGNED Beverly A. Otwell TITLE SR. ADMINISTRATIVE ANALYST DATE 4-2-86

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON TITLE DISTRICT 1 SUPERVISOR DATE APR 8 - 1986

CONDITIONS OF APPROVAL, IF ANY: