

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.	30-025-28345
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	A-1212-1
7. Lease Name or Unit Agreement Name	South Hobbs (GSA) Unit
8. Well No.	142
9. Pool name or Wildcat	Hobbs Grayburg San Andres
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3612' GR

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. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER
2. Name of Operator Amoco Production Company
3. Address of operator P.O. Box 3092, Houston, Texas 77253-3092
4. Well Location Unit Letter O : 1310 Feet From The South Line and 1370 Feet From The East Line Section 4 Township 19-S Range 38-E NMPM Lea, NM County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3612' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: Equipment Change and Acidize <input checked="" type="checkbox"/>

12. 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.

MIRUSU 3-29-93. KILL WELL X RTXIB X PTG X ESP EQPT CHANGE RAMS X RIH X BIT X SCRAPER X TBG TAG @ 4260' X POH X RIH X PKR SA 4014'. LOAD X TST X ACD PERFS 4101-4228' X 5000 GALS 20% NE HCL X ADDITIVES X 3 STAGES X 1500 GAL X 400# SALT X 1500 GAL X 600# SALT X 2000 GAL . FLUSH X MAX TRTP 1020 X AVG TRTP 600 X AIR 5 BPM X 8S8P 30 X 5 MIN O. REL PKR X POH X RIH X PROD TBG X RXIT X START RUNNING PMP. FIN RUN RODS X LOAD X TST X OK TURN OVER TO PROD TO SET PMP UNIT X BUILD WELLHEAD. RDMOSU 3-31-93.

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

SIGNATURE Devina M. Prince TITLE Staff Assistant DATE 04-07-93

TYPE OR PRINT NAME Devina M. Prince TELEPHONE NO. (713) 596-7686

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY LARRY SEXTON TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APR 12 1993