

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

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

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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-28981
5. Indicate Type of Lease	STATE ☒ FEE ☐
6. State Oil & Gas Lease No.	A-1212-1
7. Lease Name or Unit Agreement Name	South Hobbs (GSA) Unit
8. Well No.	186
9. Pool name or Wildcat	Hobbs Grayburg San Andres

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 ☒ GAS WELL ☐ OTHER ☐	
2. Name of Operator Amoco Production Company	
3. Address of Operator P. O. 3092, Houston, TX 77253	
4. Well Location Unit Letter <u>E</u> : <u>BHL2530</u> Feet From The <u>N</u> Line and <u>BHL 246</u> Feet From The <u>W</u> Line Section <u>4</u> Township <u>19-S</u> Range <u>38-E</u> NMPM Lea County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3610.4 GL	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☒
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	PLUG AND ABANDONMENT ☐
	CASING TEST AND CEMENT JOB ☐
	OTHER: ☐

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.

3/7/90 RUSU

Acidize production interval (4078'-4203') with 4425 gallons 20% Ne HCL
Flush to bottom and return well to production

3/9/90 RDSU

BWO: 150 BOPD, 2150 BWPD, 10 MCFD
AWO: 182 BOPD, 2989 BWPD, 15 MCFD

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

SIGNATURE Matthew C. Wines TITLE Administrative Analyst DATE 5/18/90

TYPE OR PRINT NAME Matthew C. Wines

713/
TELEPHONE NO. 556-3744

(This space for State Use)

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

MAY 24 1990