

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.O.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.

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.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

Name of Operator
AMOCO PRODUCTION COMPANY

Address of Operator
P. O. Box 68, Hobbs, NM 88240

Location of Well
SL/BHL C/B 1091/490 North 241/2580
UNIT LETTER C/B 1091/490 FEET FROM THE North LINE AND 241/2580 FEET FROM
THE West/East LINE, SECTION 4 TOWNSHIP 19-S RANGE 38-E NMPM.

7. Unit Agreement Name
8. Farm or Lease Name
South Hobbs (GSA) Ut
9. Well No.
221
10. Field and Pool, or Wildcat
Hobbs GSA
11. Elevation (Show whether DF, RT, GR, etc.)
3610.6' GL
12. County
Lea

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 ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER Set production casing ☒

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

7. 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.

Drill 9-7/8" hole from 1534-1763 measured depth. Directionally drill 9-7/8" hole from 1763-4293 TVD. TD 9-7/8" hole 6-17-87 at 4404' measured depth. POH. Run DLL gamma ray and caliper from 4396-3700. Run CNL/FDC, gamma ray and caliper from 4396-2700. Run 7" casing set at 4404. Cement with 1400 sx class C expanding cement. Plug down at 9:15 pm 6-18-87. Circulate 266 sx cement to surface. Pressure casing to 3000 psi and set external casing packer at 1466'. Cut off casing and install well head. Prepare to MISU to complete well.

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

By Don Mitchell Sr. Admin. Analyst DATE 6-19-87
O. M. Mitchell

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
PROVED BY _____ TITLE _____ DATE JUN 24 1987
CONDITIONS OF APPROVAL, IF ANY: