clsf

Op

Submit 3 Copies to Appropriate District Office

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

RECEIVED
APR 2 '90
O. C. D.

Form C-103
Revised 1-1-89

WELL API NO. 30-015-26264

5. Indicate Type of Lease STATE ☐ FEE ☒

6. 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.)

7. Lease Name or Unit Agreement Name: Jasso Unit

1. Type of Well: OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator: Amoco Production Company

8. Well No. 1

3. Address of Operator: P.O. Box 3092

9. Pool name or Wildcat: Loving, East Delaware

4. Well Location
Unit Letter I : 1864 Feet From The South Line and 350 Feet From The East Line

Section 22 Township 23-S Range 28-E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3022.3' GR

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	☐	PLUG AND ABANDON	☐	REMEDIAL WORK	☐	ALTERING CASING	☐
TEMPORARILY ABANDON	☐	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	PLUG AND ABANDONMENT	☐
PULL OR ALTER CASING	☐			CASING TEST AND CEMENT JOB	☐		
OTHER: Block Squeeze	☒			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.

1. Kill well with 2% KCL water & Release Packer & POH
2. Set CIBP w/wireline @ 6095' (Perfs begin at 6110')
3. Perf 6075'-6076' w/4 JSPF To block squeeze
4. RIH w/ Pkr, Test CIBP. Set above perfs. Establish inj. rate & PRS. if unable to establish inj, perf 6035'-6036' to squeeze
5. RIH w/ Cmt Ret & sting into retainer. Block squeeze w/ low water loss cement (volume to be based on inj rate & pressure.
6. Drill out ret & CIBP
7. RIH w/ production equip as run & Swab to flow
8. Based on results, supplemental brief may follow.

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

SIGNATURE Matthew C. Wines TITLE Admin. Analyst DATE 3/30/90

TYPE OR PRINT NAME Matthew C. Wines TELEPHONE NO. (713) 556-3744

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT II TITLE DATE APR 6 1990

CONDITIONS OF APPROVAL, IF ANY:

* verbal approval granted in conversation between Phillip Hill of Amoco & Mike Williams on 3/30/90 @ 3:15 PM.