

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.

305920192

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

LC 4063

7. Lease Name or Unit Agreement Name

1835

8. Well No.

161M

9. Pool name or Wildcat

TUBB

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 CO₂

2. Name of Operator

Amoco Production Company

3. Address of Operator

PO Box 606 CLAYTON N. MEX 88415

4. Well Location

Unit Letter : Feet From The Line and Feet From The Line

Section

Township

Range

NMPM

County

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

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: ☐

OTHER: PERF & FRAC

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.

Moved in, rigged up service unit 12/6/93. Killed with 2% KCL and additives and ran 3 3/8 casing gun. Perfed 2456-2490, 2440-2452 2422-2433, with 4TSPF. Graced down casing in 4 stages. Max. pres 1186 psi, Avg pres 1100 psi, Air 34 BPM. Graced with 244 BGW, 63 tons CO₂, 43240 lbs 10/20 sand. SIP 656 psi, 5 MIN. SIP 615 psi, 10 MIN SIP 598 psi, 15 MIN SIP 584 psi. Tagged sand fill at 2484', cleaned out with air and foam 2484-2590'. Ran tubing and packer and packer set at 2381'. Pressure tested casing to 500 psi and held OK. Rigged down, moved out service unit 12/10/93. Returned well to production 12/13/93.

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

SIGNATURE

Mark Randolph

TITLE

Business Analyst

DATE

1-10-94

TYPE OR PRINT NAME

MARK RANDOLPH

TELEPHONE NO.

(This space for State Use)

APPROVED BY

Ry E. Johnson

TITLE

DATE

1-14-94

CONDITIONS OF APPROVAL, IF ANY: