

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
ALBUQUERQUE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease

State ☒ Fee ☐

5. State Oil & Gas Lease No.

STANDARD NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO RE-ENTER OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE FORM C-103 FOR PROPOSALS TO DRILL OR TO RE-ENTER OR PLUG BACK TO A DIFFERENT RESERVOIR.)

1. OIL WELL ☐ GAS WELL ☒ CO ₂ OTHER ☐	7. Unit Agreement Name
2. Name of Operator Amoco Production Company	8. Form or Lease Name State GX
3. Address of Operator P. O. Box 68, Hobbs, NM 88240	9. Well No. 1
4. Location of Well UNIT LETTER G 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE East LINE, SECTION 12 TOWNSHIP 18-N RANGE 32-E NADPM.	10. Field and Pool, or Wildcat Und. Tubb
11. Elevation (Show whether DF, RT, GR, etc.) 4723.8 GR	12. County Harding

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 ☐
OTHER ☐

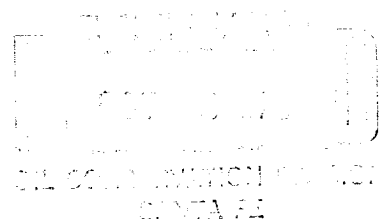
SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐
OTHER ☐

17. 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 service unit 10-13-79. Tested casing with 1500# for 30 min. Test OK. Ran correlation log 2674'-2000'. Perforated 2489'-2494', 2499'-2513', 2518'-2522', 2524'-2562', 2570'-2578' with 2 JSPF. Acidized with 2000 gal 10% MOD-101. Flushed with 12 bbl water. Currently swab testing.



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

SIGNED Bob Davis

TITLE Assist. Administrative Analyst DATE 10-18-79

APPROVED BY Carl McCoy

TITLE SENIOR PETROLEUM GEOLOGIST

DATE 10/23/79

CONDITIONS OF APPROVAL, IF ANY:
0+2 NMOCD-SF, 1-Hou, 1-Susp, 1-BD