

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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	1
FILE	1
U.S.O.S.	
LAND OFFICE	
OPERATOR	1

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
B-8385

SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT - 1" (FORM C-101) FOR SUCH PROPOSALS.)

RECEIVED

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Amoco Production Company	8. Farm or Lease Name State CF
3. Address of Operator P. O. Box 68 Hobbs, NM 88240	9. Well No. 6
4. Location of Well UNIT LETTER <u>K</u> <u>2310</u> FEET FROM THE <u>South</u> LINE AND <u>2310</u> FEET FROM THE <u>West</u> LINE, SECTION <u>13</u> TOWNSHIP <u>11-S</u> RANGE <u>27-E</u> N.M.P.M.	10. Field and Pool, or Wildcat Und. Chisum-San Andres
11. Elevation (Show whether DF, RT, GR, etc.) 3768.7 GL	12. County Chaves

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

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 7-30-80. Tested casing with 1000# for 30 min. Test OK. Perforated 2418'-2444', 2450'-2458', and 2466'-2469' with 2 JSPF. Ran tubing, packer, and tailpipe. Tailpipe set at 2332'. Packer set at 2149'. Acidized with 5000 gal. 15% HCL acid. Currently swab testing.

0+4-NMOCD, A 1-Hou 1-Susp 1-LBG 1-Wayne Stafford, Hou

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

SIGNED [Signature] TITLE Administrative Supervisor DATE 8-11-80

APPROVED BY [Signature] TITLE SUPERVISOR, DISTRICT II DATE AUG 14 1980

CONDITIONS OF APPROVAL, IF ANY: