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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes C-101  
C-102 and C-103  
Effective 1-1-65

|                                                                            |
|----------------------------------------------------------------------------|
| 5a. Indicate Type of Lease                                                 |
| State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.                                               |
| B-1111-8                                                                   |

## 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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

|                                                                                                                                                                                                          |                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|
| 1. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-                                                                                        | 7. Unit Agreement Name                               |
| 2. Name of Operator<br>Amoco Production Company                                                                                                                                                          | 8. Farm or Lease Name<br>STATE FEDERAL GAS COM       |
| 3. Address of Operator<br>BOX 68, HOBBS, N. M. 88240                                                                                                                                                     | 9. Well No.<br>1                                     |
| 4. Location of Well<br>UNIT LETTER <u>E</u> <u>1810</u> FEET FROM THE <u>NORTH</u> LINE AND <u>790</u> FEET FROM<br>THE <u>WEST</u> LINE, SECTION <u>28</u> TOWNSHIP <u>17-S</u> RANGE <u>28-E</u> NMPM. | 10. Field and Pool, or Wildcat<br>EMPIRE PENNY - GAS |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br>3641' R.D.B.                                                                                                                                            | 12. County<br>EDDY                                   |

### 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 checked="" 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 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.)

In an effort to increase productivity, remedial work performed as follows:  
Traced pyps 10033-62' w/ 10,000 gal MY-T-FRAC containing 1-5# Sand/gal. MAX 7950' MIN. 6000' AIR 10.0 BPM. Evaluated. Test 536MCFGPD x 8 BID TPF 700. CH 45/64"

TD- 10,324'

OC- 10-16-72

PBD- 10,275'

Comp- 11-21-72

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

SIGNED \_\_\_\_\_ TITLE AREA SUPERINTENDENT DATE NOV 28 1972

042-NMOC-Act

APPROVED BY 1-DIV  
CONDITIONS OF APPROVAL, IF ANY:

1-SUSD  
1-RPY

TITLE DATE NOV 28 1972