STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 37501

RECEIVED
FEB 5 19[illegible]
O. C. D
ARTESIA, OFFICE

Form C-103
Revised 10-1-

5a. Indicate Type of Lease
State ☐ Fee ☒

5. 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.)

1. OIL WELL ☐ GAS WELL ☐ OTHER- Injection Well

7. Unit Agreement Name

2. Name of Operator
Amoco Production Company ✓

8. Farm or Lease Name
Old Indian Unit

3. Address of Operator
P.O. Box 68, Hobbs NM 88240

9. Well No.
21

4. Location of Well
UNIT LETTER O , 330 FEET FROM THE South LINE AND 2283 FEET FROM THE East LINE, SECTION 7 TOWNSHIP 22-S RANGE 28-E NMPM.

10. Field and Pool, or Wildcat
Indian Draw Delaware

15. Elevation (Show whether DF, RT, GR, etc.)
3093.7 GR

12. County
Eddy

16.

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 ☐		COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	CHANGE PLANS ☐	CASING TEST AND CEMENT JOB ☐	
OTHER ☐		OTHER Fracture Stimulate ☒	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any propose work) SEE RULE 1103.

POH with injection equipment. RIH with pkr, notched collar and tbg to 3212', pumped 18 sxs sand down tbg. Spotted Cal-Seal on top of sand 3280-3270'. RIH and set pkr at 3055'. Fraced 3238-58 with 5000 gals gelled fluid and 13,000 lbs sand. POH, RIH and cleaned out to 3409'. Ran injection equipment. pkr set at 3151'. Resumed injection 254 BW, TP 224psi last 24 hrs.

015 NMOCD,A 1-TRB 1-FJN 1-GCC

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

SIGNED Gary C. Clark TITLE Asst. Admin. Analyst DATE 2-2-85

APPROVED BY Original Signed By Leslie A. Clements TITLE Supervisor District II DATE FEB 6 1985

CONDITIONS OF APPROVAL, IF ANY: