

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

RECEIVED

JUN 1 1993

C. C. D.

WELL API NO.

30-015-22553

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. 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.)

7. Lease Name or Unit Agreement Name

Teledyne 1171

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☒

OTHER

2. Name of Operator

Amoco Production Company

8. Well No.

1

3. Address of Operator

P. O. Box 3092 (Rm 17.182) Houston, TX 77253-3092 (713)596-7686

9. Pool name or Wildcat

Laguna Salada Hoka

4. Well Location

Unit Letter N : 66C Feet From The South Line and 1980 Feet From The West Line

Section 17

Township 23-S

Range 29-E

NMPM

Eddy, NM

County

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

2990' RKB

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: Dispose Waters ☒

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.

Amoco hereby requests approval to amend and/or add additional disposal site for the above well.
Shown below is detailed information pertaining to the site.

1. Formation producing water: Hoka

2. Average bbls of water per day: 10

3. Water storage: One 500 Bbl Tank

4. How water is moved: Rowland Trucking

5. Primary disposal site: Amoco's Old Indian Draw Waterflood Project
Sec 7, 18&19 T-22-S, R-28-E

Secondary disposal site:
(If applicable)

Springs Unit Well No. 2
Sec. 27, T-20-S, R-26-E

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

Devina M. Prince,

SIGNATURE

Devina M. Prince

TITLE Staff Assistant

DATE 5-24-93

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT I

TITLE

APPROVED BY

DATE

JUN 7 1993

CONDITIONS OF APPROVAL, IF ANY: