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OPERATOR		

HOBBBS OFFICE O. C. C.
NEW MEXICO OIL CONSERVATION COMMISSION

MAR 31 11 40 AM '66

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

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Farm or Lease Name H.C. Posey "A"	
9. Well No. 6	
10. Field and Pool, or Wildcat East Caprock	
12. County Lea	

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	
2. Name of Operator Amerada Petroleum Corporation	
3. Address of Operator P. O. Box 668 - Hobbs, New Mexico	
4. Location of Well UNIT LETTER H 990 FEET FROM THE East LINE AND 1650 FEET FROM North LINE, SECTION 11 TOWNSHIP 12S RANGE 32E NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.) 4349' DF	

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

Pulled and laid down rods, pump and tubing. Ran Bond log and Gamma Ray Neutron log. Set cast iron bridge plug at 11,070' with one sack cement on top. Top of cement at 11,062'. Perforated 5-1/2" casing by Schlumberger Micro log from 10,966' to 10,976' with 2 shots per foot. Acidized perfs. with 1000 gals. 15% reg. acid. Swabbed well in. Started flowing 3-28-66.

Test 2-1-66 - 24 Hrs. Pumped 207 BO & 830 BW on 8-120" SPM.

Test 3-29-66 - 24 Hrs. Flowed 288 BO, no water on 12/64" choke. TP 160#.

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

SIGNED <u>D.C. Capps</u>	TITLE <u>District Superintendent</u>	DATE <u>3-30-66</u>
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

THE