

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-73

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☐ Fee ☒
5. State Oil & Gas Lease No.

<p>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.)</p>		
<p>1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-</p>		7. Unit Agreement Name
<p>2. Name of Operator AMOCO PRODUCTION COMPANY</p>		8. Farm or Lease Name Wingerd
<p>3. Address of Operator P. O. Box 68, Hobbs, NM 88240</p>		9. Well No. 10
<p>4. Location of Well UNIT LETTER <u>J</u> <u>2310</u> FEET FROM THE <u>South</u> LINE AND <u>1650</u> FEET FROM THE <u>East</u> LINE, SECTION <u>24</u> TOWNSHIP <u>12-S</u> RANGE <u>37-E</u> NMPM.</p>		10. Field and Pool, or Wildcat Gladiola- Devonian
<p>15. Elevation (Show whether DF, RT, GR, etc.) 3886' KB</p>		12. County Lea

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"/>	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"/>	OTHER <u>acidize</u> <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.

MI and RUSU. POH with production equipment. RIH with packer and set at 11534. Pump 30 bbl 2% KCLW as cool down pad. Acidize with 7000 gal. DGA 215-Surfactant gelled acid 15% HCL. Max pressure 1650# and min pressure 190# and air 12 BPM. RIH with production equipment. RD and MOSU 4-14-87.

PPWO: 24 BOPD x 0 MCF x 79 BWPD.
PAWO: 38 BOPD x 0 MCF x 93 BWPD.

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

SIGNED Jerry Sexton S. Brownlee

TITLE Admin. Analyst

DATE 4-21-87

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

APPROVED BY

TITLE

DATE

APR 23 1987

CONDITIONS OF APPROVAL, IF ANY: