

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

NEW MEXICO OIL CONSERVATION COMMISSION

LAND OFFICE
OPERATOR

4a. Indicate Type of Lease
State ☐ Lease ☒
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 - A" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Unit Agreement Name
2. Name of Operator Amoco Production Company	8. Farm or Lease Name WINGERD
3. Address of Operator BOX 68, HOBBS, N. M. 88240	9. Well No. 10
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> N.M.P.M.	10. Field and Pool, or Wildcat GLADIOLA DEV
15. Elevation (Show whether DF, RT, GR, etc.) 3886' R. D. B.	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 ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐

REMEDIAL WORK ☒
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐
OTHER ☐

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 increase productivity remedial work performed as follows:

Set CI Retainer @ 11792 and squeezed below w/ 50 Sx Cement + additives. Left 62' Cement cap on retainer. Acidized perforations 11641-11780 w/ Thick Gel Fracturing type acid + 5000 gal 24% HCL. Evaluated & restored to production.

Prior - Pmp 5 B0X66 BW 24 hrs.
After - " 21" x 96 " " "

TD. 12016'
PB - 11730'

OC - 5-1-73
COMP - 5-22-73

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 MAY 22 1973

012-NMOCC-41
APPROVED BY 1-DIV
1-SUP
1-RRY
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE _____