

RECEIVED	
DATE	
TIME	
BY	
FOR	
OFFICE	
OPERATION	

SUMMARY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR WELLS THAT ARE NOT PRODUCING OR ARE NOT BEING PRODUCED IN A RESERVOIR.
SEE INSTRUCTIONS FOR DETAILS OF FORMS REQUIRED FOR SUCH PRODUCTION.)

1. ☐ OIL WELL ☐ GAS WELL ☐ OTHER ☒ Injection		2. Well Owner's Name
3. Name of Operator		4. State of Lease Holder
Amoco Production Company		Harris State
5. Address of Operator		6. Well No.
P. O. Box 68 Hobbs, NM 88240		1
7. Location of Well		8. Field and Pool, or Whence
UNIT LETTER N 1980 FEET FROM THE W LINE AND 660 FEET FROM		Ranger Penn
THE South LINE, SECTION 29 TOWNSHIP 13-S RANGE 34-E		9. County
10. Elevation (Show whether DF, RT, GR, etc.)		Lea
4157' GL		

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 ☐	CHANGE PLANS ☐	CONSIDER DRILLING OPER. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☐	
OTHER		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.

Propose to increase injectivity by the following procedure:
Acid stimulate with 6000 gallons 15% NE acid in 4 equal stages. Pump blocks of 500 lbs. of rock salt in 12 bbls. of gelled brine in first 3 stages. Flush with 50 bbls. of lease water. Return well to injection.

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

SIGNED Martha E. Eales TITLE Assist. Admin. Analyst DATE 5-5-80

APPROVED BY John Runyan TITLE Geologist DATE 5-5-80

CONDITIONS OF APPROVAL, IF ANY:

0+4-NMOCD, H

1-Hou

1-MKE

1-Susp