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

Form C-103
Revised 10-1-73

Sub. Indicate Type of Lease
State ☐ For ☒
State Oil & Gas Lease No.

SUNDARY 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.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

Name of Operator
AMOCO PRODUCTION COMPANY

Address of Operator
P.O. BOX 68 HOBBS, NEW MEXICO 88240

Location of Well
UNIT LETTER C 330 FEET FROM THE North LINE AND 1650 FEET FROM
THE West LINE, SECTION 19 TOWNSHIP 5-S RANGE 33-E N.M.P.M.

1. Unit Agreement Name
2. Farm or Lease Name
WILBANKS
3. Well No.
1
4. Field and Pool, or Wildcat
Peterson Fusselman
5. County
Roosevelt

15. Elevation (Show whether DF, RT, GR, etc.)
4419.1 GR

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

FORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
REPAIR OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	OTHER <u>Perf Addl pay and Stimulate</u> ☒

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.

MISW 6-23-85 and POH w/ prod equipment. RHT and perfed 7800'-14' w/ 4 JSF.
RHT w/ PPI pkr and SA 7679'. Acidized in 1' intervals 7800'-23' w/ 1200 gal 15%
HCL w/ add. Ran SN line to retrieve valve. Left 400' of SN line in hole. Reset
pkr at $\pm$ 7700' and acidized w/ 1200 gal 15% HCL acid w/ add and 4 ball sealers
per bbl acid. Swabbed well. POH w/ tbg and pkr. RHT w/ mother hubbard, SN
5 jts tbg, tbg anchor and tbg to 7816'. Ran rods and pump. Loaded tbg and tested
to 500 psi. - OK. MOSW 6-27-85, Pump tested through 7-10-85. Finaled W/O. 7-11-85
PPWO: 100 BOPD x 22 BWPD x 50 MCFD
PAWO: 33 BOPD x 19 BWPD x 100 MCFD

0+5 NMCD-H, 1-JRB, 1-FIN, 1-NLG

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

CO Thurk Jones TITLE Administrative Analyst DATE 13 July 1985
ORIGINAL SIGNED BY JOHN L. LAYTON
DOWNS BY DISTRICT SUPERVISOR TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

JUL 17 1985