

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

**OIL CONSERVATION DIVISION**  
P.O. Box 2088

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

Santa Fe, New Mexico 87504-2088

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO. 30-025-07565
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. A-1212-1
7. Lease Name or Unit Agreement Name South Hobbs (GSA) Unit
8. Well No. 5
9. Pool name or Wildcat Hobbs Grayburg - San Andres
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3630' MS

**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.)

1. Type of Well  
OIL WELL  GAS WELL  OTHER

2. Name of Operator  
Amoco Production Company (Room 17.141W)

3. Address of operator  
P.O. Box 3092, Houston, Texas 77253-3092

4. Well Location  
Unit Letter P : 660 Feet From The South Line and 660 Feet From The East Line  
Section 33 Township 18-S Range 38-E NMPM Lea, NM County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input 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"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: _____ <input type="checkbox"/>	

12. 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.

- MIRUSU. KILL WELL W/ BRINE & 2 GPT WA-212 (IF NEEDED)
- POH W/ PRODUCTION TBG X EQUIP. INSPECT & REPAIR EQUIPMENT AS NECESSARY.
- RIH W/ BIT x TAILPIPE X TBG. TAG AND CLEAN OUT (IF FILL > 15 FT) TO TD.
- RIH W/ IPC WKSTRING x 4' PERF SUB (1 JSPF, 90 deg. phas., 0.5" exit holes) X PPI (Unipoint)..
- STIMULATE OPEN HOLE W/ 500 GALS 20% HCL.
- DROP CONTROL DART, DROP INJ CONTROL VALVE (GUIBERSON EQUIP)
- STIM PERFS 4162-4208', 4094' 4147', and 4050-4080' W/ 6450 GALS 20% HCL
- PULL VALVE, SWAB TO REC 125% LOAD FLDS. SWAB NO MORE THAN 4 HRS.
- POH x PKR X RIH X ESP EQUIP X RTP.

ENGINEERING CONTACT: DAVE FRENCH (713) 366-4237

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

SIGNATURE Devina M. Prince TITLE Staff Assistant DATE 12-21-94

TYPE OR PRINT NAME Devina M. Prince TELEPHONE NO. (713) 366-7686

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

010 27 1334