Submit 3 Copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office	orgy, willionals and reaction res	ources Dopulation				
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION P.O.Box 2088			WELL API NO.			
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088			30-025-07569 5. Indicate Type of Lease			
DISTRICT III			J. Maiouto Type	STATE FEE		
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Ga	as Lease No. A-1212-1		
SUNDRY NOT	ICES AND REPORTS ON W	/ELLS				
(DO NOT USE THIS FORM FOR PRO DIFFERENT FESER (FORM C	7. Lease Name or Unit Agreement Name South Hobbs (GSA) Unit					
1. Type of Well			South Hobbs (G	SA) Unit		
OIL GAS WELL	OTHER					
2. Name of Operator			8. Well No.			
Amoco Production Compary (Room 18.108)			3			
3. Address of operator	•			9. Pool name or Wildcat		
P.O. Box 3092, Houston, 4. Well Location	T.exas 77253-309	3 2	Hobbs	s Grayburg San Andres		
	0 Feet From The South	Line and 5	60 Feet Fron	n The West	Line	
Section 34	Township 18S R	Range 38E 1	NMPM	Lea, NM Coun	ty	
	10. Elevation (Show wheth	her DF, RKB, RT, GR, etc.) 3630'RDB		a succession of the second of		
11. Check Apr	propriate Box to Indicate 1	Nature of Notice. Re	eport, or Othe	er Data		
NOTICE OF INT	•	1	BSEQUENT RE			
[]						
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING		
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS.	PLUG AND ABANDONMEN	т 🔲	
PULL OR ALTER CASING CASING TEST AND CEME			MENT JOB			
OTHER: Treat Scale Buildup	x Perf x RTP	OTHER:				
12. Describe Proposed or Completed Opework.) SEE RULE 1103.	rations (Clearly state all pertinent deta	ils, and give pertinent dates,	including estimated	date of starting any proposed		
1. POH WITH PRODUCTION TBG X EQUIPMENT AS NECESSARY. 2. PERF x 4 SPF x 90 or 120 DEGR 4060-4094, 4110-4130, 4140-4 3. RIH WITH WORKSTRING AND P ACIDIZE PAY W/ 7800 GA _ 20% 2 GAL/1000 GAL WA-211; 2 G/PUMP using 2 ft spacing 50 gal/f then dump 1000 gal into open he PUMP AT 5 BPM X LIMIT FRESS 4. FLUSH TO PERFS WITH 40 BBLS 5. RELEASE PKR AND POH. 6. RIH WITH PRODUCTION EQUIPM TO PRODUCTION. 7. PUMP SCALE SQUEEZE TO INHI	REE PHASING THE FOLLOWING: 1222. PI PKR. 15 NE HCL CONTAINING 16 AL/1000 GAL WA-212. 1 (6800 gai) 16. URE TO 2000 PSI ABOVE RFC OF 15 CLEAN WATER. MENT AS PULLED ABOVE X RETU					
I hereby certify that the information above	e is true and complete to the best of n	my knowledge and belief.				
SIGNATURE Kuma M.	Thince	TITLE Staff A	ssistant	DATE 01-04-94		
TYPE OR PRINT NAME	Devina M. Pri	nce		TELEPHONE NO. (713) 36	6-7686	
	AL SIGNED BY JERRY SEXTON ISTRICT I SUPERVISOR	,		JAN 1 11 19	94	
APPROVED BY		TITLE		DATE		