Submit 3 Copies to Appropriate District Office

CONDITIONS OF APPROVAL, IF ANY:

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 P.O.Box 2088		WELL API NO.	
DISTRICT II Santa Fe New Mexico 87504-2088		30-025-07576		
P.O. Drawer DD, Artesia, NM 88210		5. Indicate Type of Lease		
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.	FEE 🗸
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.)			7. Lease Name or Unit Agreement Name	
1. Type of Well	7		South Hobbs (GSA) Unit	
OIL GAS WELL	OTHER			
2. Name of Operator	(D. 49.499)		8. Well No.	
Amoco Production Company	(Room 18.108)		7	
P.O. Box 3092, Houston,	Texas 77253-309	9. Pool name or Wildcat Hobbs Grayburg San Andres		
4. Well Location				
Unit Letter N : 660	Feet From The South	Line and 10	Feet From TheWe	est Line
Section 34	Township 18-S	Range 38-E N	MPM Lea, NM	County
	10. Elevation (Show wheth	her DF, RKB, RT, GR, etc.) 3614' DF		
11. Check Apr	propriate Box to Indicate 1		nort or Other Date	
NOTICE OF INT		1		
NOTICE OF INT	ENTION TO.	301	SSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASI	NG
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABA	NDONMENT
PULL OR ALTER CASING		CASING TEST AND CEMENT JOB		
OTHER:		OTHER:	Acidize	\
12. Describe Proposed or Completed Oper work.) SEE RULE 1103.	ations (Clearly state all pertinent deta	ils, and give pertinent dates, it	ncluding estimated date of starting an	y proposed
MI RUSU (2-2-94) X RTXIB X PTG X X RIH X PKR X TBG X PSA 4014 X 750# SALT X 2500 GAL X 1750# S PKR X POH. RIH X ESP EQPT XRBX	LOAD X TST X 500 PSI X ACD P SALT X 3000 GAL X FLUSH X 75	PERFS X OH X 8000 GALS 5 BFW X MAX TRTP 1190 X	20% X ADDITIVES X 3 STAGES K AVG TRTP 300 X AIR 5 BPM X	X 2500 GAL X
I hereby certify that the information above SIGNATURE DEVELOR M. CTYPE OR PRINT NAME (This space for State Use)	\widehat{A} .	TITLE Staff Ass	TELEPHONE N	0.
•		Oris. Signed Paul Kau Trile Geologie	Dy . 22. j.	1AK : 1 1994
APPROVED BY		TITLE Geologis	DATE	