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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E-8979

SUNDY 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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Amoco Production Company	8. Farm or Lease Name STATE CP
3. Address of Operator BOX 68, HOBBS, N. M. 88240	9. Well No. 1
4. Location of Well UNIT LETTER D 994.3 FEET FROM THE NORTH LINE AND 330 FEET FROM THE WEST LINE, SECTION 1 TOWNSHIP 18-S RANGE 33-E NMPM.	10. Field and Pool, or Wildcat CORBIN Abo
15. Elevation (Show whether DF, RT, GR, etc.) 4110' R.D.B.	12. County Lea

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" 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"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

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 1108.

In an effort to increase productivity
acidized perforations 8737-80' w/ 15,000 gal
15% NE retarded acid in 5 equal stages.
Evaluated and restored to production.
Prior - Pmp 20 BOx 8BW 24 Hours.
After - " 32 BOx 54 BW " "
TD - 8810' OC - 5-9-74
PBD - 8783' comp - 5-29-74
4 1/2" CSA 8810

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

SIGNED <i>By R. Yorkum</i>	TITLE ADMINISTRATIVE ASSISTANT	DATE JUN 4 1974
APPROVED BY <i>1-2- NMOCC-147</i> <i>1-DIV</i> <i>1-SUPV</i> <i>1-RK</i>	Orig. Signed by Joe D. Ramey Dist. 1, Supv.	DATE JUN 6 1974