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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.
5380 SS

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. 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 "DR"
3. Address of Operator P.O. Drawer "A", Levelland, Texas 79336	9. Well No. 3
4. Location of Well UNIT LETTER <u>A</u> <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE, SECTION <u>16</u> TOWNSHIP <u>19-S</u> RANGE <u>32-E</u> N.M.P.M.	10. Field and Pool, or Wildcat Und. Wolfcamp
15. Elevation (Show whether DF, RT, GR, etc.) 3653.3 RDB	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 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 1103.

Moved in and rigged up service unit 1/25/79. Tested casing 1000# for 30 minutes. Test O.K. Perforated Wolfcamp 10,721'-28' w/4 DFJSPF. Ran tubing and packer. Tailpipe set at 10,694' and packer set at 10,633'. Spotted 2 bbl. 15% HCL acid across perms. Acidized with 1000 gal. HCL acid. Flushed with 44 BFW. Swab tested well. Released service unit 1/29/79.

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

SIGNED Ray Cox TITLE Administrative Supervisor DATE February 5, 1979

APPROVED BY Jerry Sexton TITLE Dist. 1, Supv. DATE FEB 8 1979

CONDITIONS OF APPROVAL, IF ANY: