

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-73

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

3a. Indicate type of lease
State ☒ Fee ☐

3. State Oil & Gas Lease No.
L-3556

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG A WELL TO A DIFFERENT RESERVOIR.
USE APPLICATION FOR PERMIT TO DRILL (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

Name of Operator
AMOCO PRODUCTION COMPANY

Address of Operator
P.O. BOX 68 HOBBS, NEW MEXICO 88240

Location of well
UNIT LETTER N 960 FEET FROM THE South LINE AND 1980 FEET FROM
THE West LINE, SECTION 25 TOWNSHIP 18-S RANGE 34-E N.M.P.M.

7. Unit Agreement Name

8. Form or Lease Name
State 'FLU'

9. Well No.
Z

10. Field and Pool, or Wildcat
Airstrip Wolfcamp

15. Elevation (Show whether DF, RT, GR, etc.)
3967.5' GR

12. County
Lea

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

FORM REMEDIAL WORK ☐
PERMANENTLY ABANDON ☐
OR ALTER CASING ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

REMEDIAL WORK ☐
COMMENCE DRILLING OPERATIONS ☐
CASING TEST AND CEMENT JOBS ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

OTHER Recompletion Operations ☒

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.

MISC 9-18-85 and POH with rods and pump. Pumped 40BW down tubing and 100BW down casing. POH with tubing. RIH with bit and bailer. Cleaned out fill from 10,561'-10,744'. Perforated Wolfcamp intervals 10,602'-646' with 4SPF. RIH with packer and set at 10,500'. Swabbed 1 hr. Acidized with 5000 gals 15% HCL acid. Swabbed 13 hrs and recovered 65 BHW, 18 BO, and good show of gas. Released packer and POH. Set RBP at 10,500'. Left Wolfcamp shut-in pending NMOC approval to DHC. Operations completed 9-25-85.

NMOC, Hobbs 1-JRB 1-FSN 1-CMH 1-Mesa

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

C. Herring

TITLE Administrative Analyst (SG)

DATE 9-27-85

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

COPIES BY _____ TITLE _____

DATE OCT 1 - 1985

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

SEP 30 1985

O.C.D.
HOBBS OFFICE