STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1

5a. Indicate Type of Lease
State [X] Fee [ ]

5. 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 BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT —" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL [ ] GAS WELL [ ] OTHER- Salt Water Disposal

7. Unit Agreement Name

2. Name of Operator
Amoco Production Company

8. Farm or Lease Name
State FU

3. Address of Operator
P.O. Box 68, Hobbs NM 88240

9. Well No.
3

4. Location of Well
UNIT LETTER E, 1700 FEET FROM THE North LINE AND 660 FEET FROM THE West LINE, SECTION 25 TOWNSHIP 18-S RANGE 34-E NMPM.

10. Field and Pool, or Wildcat
Airstrip Bone Springs

15. Elevation (Show whether DF, RT, GR, etc.)
3974.8 GR

12. County
Lea

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK [ ]
TEMPORARILY ABANDON [ ]
PULL OR ALTER CASING [ ]
PLUG AND ABANDON [ ]
CHANGE PLANS [ ]
OTHER Fracture stimulate [X]

SUBSEQUENT REPORT OF:

REMEDIAL WORK [ ]
COMMENCE DRILLING OPNS. [ ]
CASING TEST AND CEMENT JOB [ ]
ALTERING CASING [ ]
PLUG AND ABANDONMENT [ ]
OTHER [ ]

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.

Propose to Fracture stimulate Bone Springs to increase disposal rates and repair communication between tbg and csg as follows:
POH with inj equipment. RIH with workstring and spot 20/40 sand from PBTD (± 10315') to 10150' apx 35 sxs. POH with tbg. Frac down 7" csg. with 54,000 gals of 30# HPG X-linked 2% fresh water and 170,000 lbs of 20/40 Ottawa sand. Clean out sand to PBTD. Run injection equipment and set pkr at 9104'. Return well to injection.

D+5 NMOCD, H 1-JRB 1-FJN 1-GCC

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

SIGNED Gary C. Clark TITLE Asst. Admin. Analyst DATE 12-12-84

APPROVED BY [illegible] TITLE [illegible] DATE [illegible]

CONDITIONS OF APPROVAL, IF ANY: