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

Form C-103
Revised 10

| | |
|---|-----|
| 5a. Indicate Type of Lease | |
| State <input checked="" type="checkbox"/> | Fee |
| 5. State Oil & Gas Lease No. L-6309 | |

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER- | 7. Unit Agreement Name |
| 2. Name of Operator Amoco Production Company | 8. Farm or Lease Name State HS Com. |
| 3. Address of Operator P. O. Box 68, Hobbs, NM 88240 | 9. Well No. 1 |
| 4. Location of Well UNIT LETTER <u>K</u> <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>9</u> TOWNSHIP <u>18-S</u> RANGE <u>34-E</u> NMPM. | 10. Field and Pool, or Wildcat Wildcat Wolfcamp |
| 15. Elevation (Show whether DF, RT, GR, etc.) 4066.8 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"/> | |

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any prop work) SEE RULE 1103.

Moved in service unit 10-14-81 (X-Pert #15). Pulled tubing and packer. Ran CIBP set at 13470'. Capped with 35' cement. Perfed Wolfcamp interval 11110-20' with 4 JSPF. Tested packer and tubing to 500 PSI. Held OK. Packer set at 10901'. Swabbed 10-19-81 to 10-21-81. Recovered 0 BO, 130 BW, and 0 MCF gas. Pulled tubing and packer. Ran CIBP set at 11050'. Test to 500 PSI. Tested OK. Perfed Bone Springs interval 10548'-78' with 2 JSPF. Ran tailpipe to 10445' and set packer at 10353'. Swabbed 9 hrs. Recovered 34 BW. Pumped 4500 gallons 15% HCL and 75 ball sealers down hole. Flushed with 45 barrels brine. Maximum treating PSI 5500. Swabbed 2½ hrs. Recovered 35 BLW. Currently swabbing.

0+4-NMOCD, H 1-Hou 1-Susp 1-W. Stafford, Hou 1-DMF

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

| | | |
|-----------------------------------|-------------------------------------|----------------------|
| SIGNED <u>Mark Truma</u> | TITLE <u>Assist. Admin. Analyst</u> | DATE <u>12-11-81</u> |
| Orig. Signed by Jerry Sexton | | |
| APPROVED BY <u>Dist. 1, Supr.</u> | TITLE | DATE |
| CONDITIONS OF APPROVAL, IF ANY: | | |