

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

Form C-103  
Revised 10-1-77

|                        |  |
|------------------------|--|
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| OPERATOR               |  |

5a. Indicate Type of Lease  
State ☐ Fee ☒  
5. State Oil & Gas Lease No.

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 TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.

|                                                                                                                                                                                                                        |                                                             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Injection</u>                                                                                                                          | 7. Unit Agreement Name                                      |
| 2. Name of Operator<br>AMOCO PRODUCTION COMPANY                                                                                                                                                                        | 8. Farm or Lease Name<br><u>South Hobbs (GSA) Unit Corp</u> |
| 3. Address of Operator<br>P.O. BOX 68 HOBBS, NEW MEXICO 88240                                                                                                                                                          | 9. Well No.<br><u>6</u>                                     |
| 4. Location of Well<br>SL/BHL UNIT LETTER <u>E/D</u> <u>1950/1290</u> FEET FROM THE <u>North</u> LINE AND <u>535/58</u> FEET FROM THE <u>West</u> LINE, SECTION <u>34</u> TOWNSHIP <u>18-S</u> RANGE <u>38-E</u> NMPM. | 10. Field and Pool, or Wildcat<br><u>Hobbs GSA</u>          |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br><u>3637.1' GL</u>                                                                                                                                                     | 12. County<br><u>Lea</u>                                    |

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 1103.

MISU 10-28-85. Released packer and PCH. RTH with notched collar and tagged PBTD at 4408' with no fill. Ran PPI packer and acidized perfor 4406-4261' in 2' intervals with 100 gals 15% NEHCl per interval. PCH with PPI packer. Re-ran injection packer and tubing. Set packer at 4139' and pressure tested annulus 650 psi-ok. MOSU 10-31-85 and Commenced injection 11-1-85. Operations completed 11-3-85.

IPWD: 1500 BWIPD at 295 psi.

IAWD: 2500 BWIPD at TPon Vac.

0+5 NMOC-D-H 1-JRB 1-FJN 1-CMH

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

SIGNED Charles M. Herring TITLE Administrative Analyst (SG) DATE 11/4/85

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT SUPERVISOR

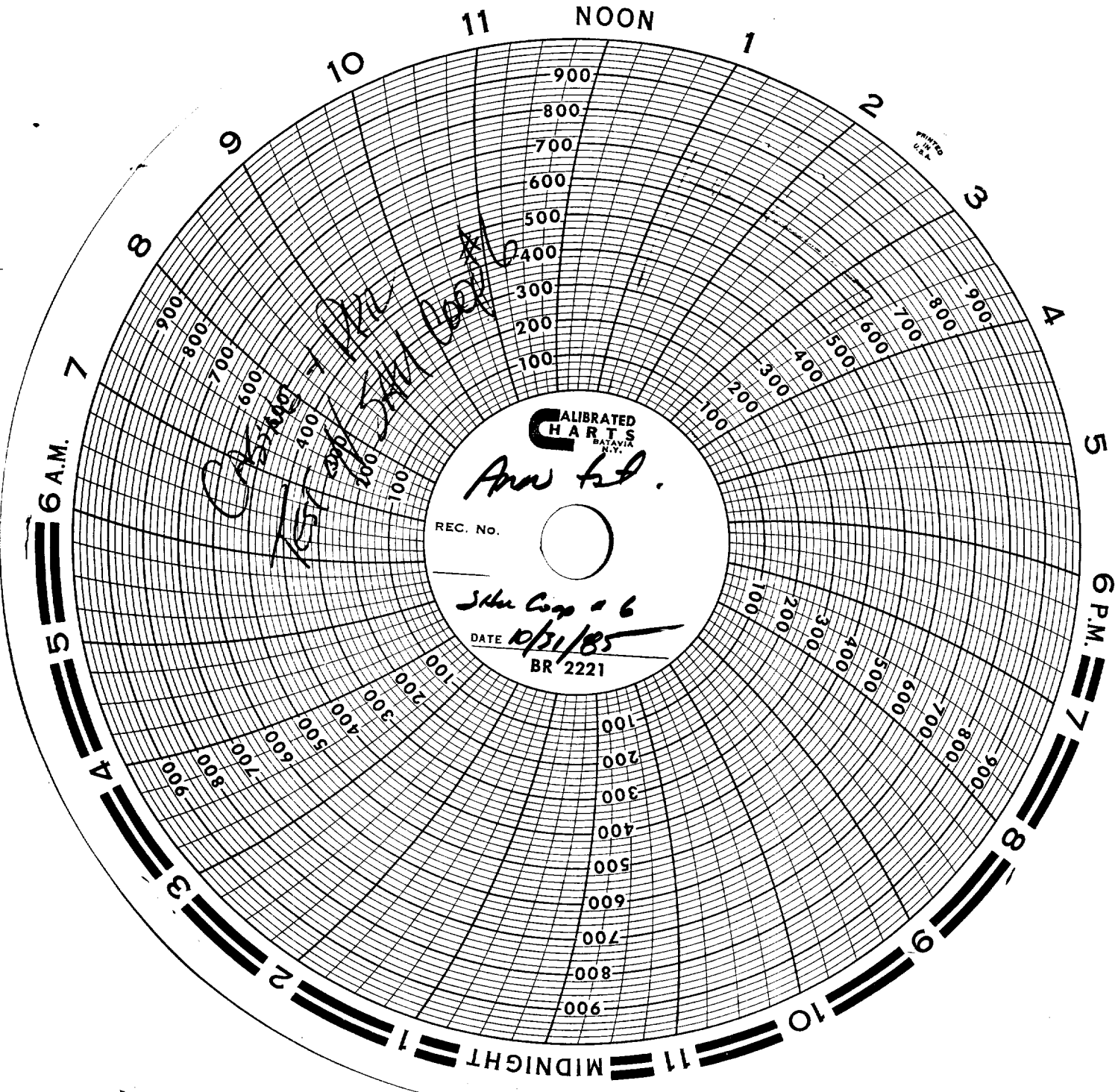
TITLE

DATE

NOV 6 - 1985

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED  
NOV 5-1985  
O.C.B.  
HOBBS OFFICE



CALIBRATED  
CHARTS  
BATAVIA  
N.Y.

*Ann L. D.*

REC. No.

*Sklar Corp # 6*

DATE *10/31/85*

BR 2221

RECEIVED

NOV 5 - 1985

O.C.D.  
HOMES OFFICE