

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 10-1-78

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
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" - " (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER - <u>Injection Well</u>		7. Unit Agreement Name
2. Name of Operator <u>Amoco Production Company</u>		8. Farm or Lease Name <u>South Hobbs (GSA) Ut. Coop</u>
3. Address of Operator <u>P. O. Box 68, Hobbs, New Mexico 88240</u>		9. Well No. <u>6</u>
4. Location of Well 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> N.M.P.M.		10. Field and Pool, or Wildcat <u>Hobbs GSA</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>3637.1' GL</u>		12. County <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 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 <u>status update</u> <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.

Commenced injection 11-15-83. Injected 250 BWP/D at 300 psi. Well completed 11-16-83 and currently on injection.

O+5-NMOCD,H 1-F. J. Nash, HOU Rm. 4.206 1-R. E. Ogden, HOU Rm. 21.150 1-Texaco 1-Shell 1-Sun 1-Petro Lewis 1-CLF

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

SIGNED Cathy L. Gorman TITLE Assist. Admin. Analyst DATE 12-8-83

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE DEC 13 1983

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
DEC 12 1983
O.C.D.
HOBBS OFFICE