

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-77

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

3a. Indicate Type of Lease  
State ☐ Fee ☒  
3. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REDEVELOP OR PLUG SITES TO A DIFFERENT RESERVOIR.  
USE APPLICATION FOR PERMIT - (FORM C-101) FOR SUCH PROPOSALS.

|                                                                                                                                                                                                                    |                                                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|
| 1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER: <u>Water Injection</u>                                                                                      | 7. Unit Agreement Name                                 |
| 2. Name of Operator<br><u>AMOCO PRODUCTION COMPANY</u>                                                                                                                                                             | 8. Form or Lease Name<br><u>South Hobbs (GSA) Unit</u> |
| 3. Address of Operator<br><u>P. O. BOX 3092; HOUSTON, TEXAS 77253</u>                                                                                                                                              | 9. Well No.<br><u>127</u>                              |
| 4. Location of well<br><u>SL/BHL</u> L/m <u>1980/1280</u> FEET FROM THE <u>South</u> LINE AND <u>860/1234</u> FEET FROM<br>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 widest<br><u>Hobbs GSA</u>      |
| 11. Elevation (Show whether OF, RT, GR, etc.)<br><u>3625' GL</u>                                                                                                                                                   | 12. County<br><u>Lee</u>                               |

16. 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 OPER. <input type="checkbox"/>    | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>  | OTHER <input type="checkbox"/>            | CASING TEST AND CEMENT JOB <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 1703.

MI and Rusu 8-10-88 and pull injection tubing and packer. Run bit and tag at 4363'. Run packer and set at 4106' and acidize from 4180' 4223' with 3225 gallons of 15% NE HCl. Run injection packer and tubing and displace hole with packer fluid. Set packer at 4032' and test to 520 psi for 30 minutes. RD and Mosu 8-12-88 and return well to injection.

IPWO: 1850 BWIPD at 100 psi.

IAWO: 2490 BWIPD at 100 psi.

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

by Maurice Mitchell TITLE Sr. Admin. Analyst DATE 10-6-88

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT 1 SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE OCT 28 1988

CONDITIONS OF APPROVAL, IF ANY: