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LAND OFFICE	
OPERATOR	

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

SUNDARY NOTICES AND REPORTS ON WELLS

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

1. ☐ OIL WELL ☐ GAS WELL ☐ OTHER- Water Injection		7. Unit Agreement Name
2. Name of Operator AMOCO PRODUCTION COMPANY		8. Farm or Lease Name South Hobbs (GSA) Unit
3. Address of Operator P.O. Box 4072, Odessa, Texas 79760		9. Well No. 127
4. Location of Well SL/BHL UNIT LETTER L/M 1980/1280 FEET FROM THE South LINE AND 860/1234 FEET FROM THE West LINE, SECTION 34 TOWNSHIP 18-S RANGE 38-E N.M.P.M.		10. Field and Pool, or Wildcat Hobbs GSA
15. Elevation (Show whether DF, RT, GR, etc.) 3625' GL		12. County Lea

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

NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☒	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPER. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	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 1703.

MI and RUSU 4-6-88 to acidize well to increase injectivity. Pull injection packer and tubing. Run bit and workstring and tag PBTD at 4423'. Run PPIP set on 2 foot spacing and acidize from 4180' to 4223' with 3225 gallons of 20% NE HCl. Run injection packer and tubing and displace hole with packer fluid. Set packer at 4032' and test casing and packer to 550 psi for 30 minutes and test ok. RD and MOSU 4-8-88 and return well to injection.

IPWO: 1700 BWIPD at 650 psi
IAWO: 2680 BWIPD at 150 psi

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

Signed O. M. MITCHELL TITLE Sr. Admin. Analyst DATE 4-21-88

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE APR 25 1988

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

APR 22 1988

**OCD
HOBBS OFFICE**