

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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|---|
| WELL API NO. 30-025-28333 |
| 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No. |

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| 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. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Water Injector | 7. Lease Name or Unit Agreement Name South Hobbs (GSA) Unit |
| 2. Name of Operator Amoco Production Company | 8. Well No. 129 |
| 3. Address of Operator P. O. Box 3092, Houston, Texas 77253 | 9. Pool name or Wildcat Hobbs Grayburg San Andres |
| 4. Well Location SL/BHL Unit Letter M/N : 100/3 Feet From The South Line and 900/322 ¹³²² Feet From The West Line Section 34 Township 18-S Range 38-E NMPM Lea County | |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3618.9' GR | |

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| 11. 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"/> | REMEDIAL WORK <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> |
| OTHER: Perforate to 4334' & Acidize Pay <input checked="" type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/> |
| | CASING TEST AND CEMENT JOB <input type="checkbox"/> |
| | OTHER: <input type="checkbox"/> |

12. 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.

1. MIRU Service Unit & pull injection equipment.
2. Perforate intervals 4286'-4304' & 4314'-4334' with 4 JSPF. Correlate to GR-DSN Log (Welex) dated 11/11/83.
3. Acidize PERFS with 50 gal/ft 20% Ne HCL & Additives (WA 211,212) using PPI packer at 4' spacing. Pump at 2 BPM. Total Acid Volume 5100 gal. PERFS 4143'-4334'.
4. Flush to bottom with 50 Bbl water.
5. Re-run injection equipment & RDSU.
6. Return well to injection.

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

SIGNATURE Matthew C. Wines TITLE Administrative Analyst DATE 2-28-90
TYPE OR PRINT NAME Matthew C. Wines TELEPHONE NO. 713/ 556-3744

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

MAR 05 1990