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 [X] Fee [ ]

5. State Oil & Gas Lease No.: E-5014

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.)

OIL WELL [X] GAS WELL [ ] OTHER-

7. Unit Agreement Name:

Name of Operator: AMOCO PRODUCTION COMPANY

8. Farm or Lease Name: STATE "NM"

Address of Operator: P.O. BOX 68 HOBBS, NEW MEXICO 88240

9. Well No.: 1

Location of Well: UNIT LETTER B, 672 FEET FROM THE North LINE AND 1980 FEET FROM THE East LINE, SECTION 35 TOWNSHIP 18-S RANGE 34-E NMPM.

10. Field and Pool, or Wildcat: Airstrip Bone Springs

15. Elevation (Show whether DF, RT, GR, etc.): 3977.5'GR

12. County: Lea

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 [X]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]		COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]	CHANGE PLANS [ ]	CASING TEST AND CEMENT JOB [ ]	
OTHER [ ]		OTHER [ ]	

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.

MI SU 9-9-85 and pulled rods and pump. Pumped 150 Bbl down casing and POH with tubing. Perforated 10320'-332', 10338'-360', 10364'-377' and 10,328-400' with 4 SPF. Pumped 100 Bbl down casing. Ran pinpoint injection packer and acidized intervals 10,400'-10320' in 6' spacings with 300 gals 15% NEFE HCL per setting. Pulled up and set packer at 10,145'. Acid fractured with 10,000 gals X-linked gelled 2% KCL FW and 5000 gals 20% NEFE HCL gelled acid. Flushed with 90 Bbls gelled 2% KCL W. Released packer and POH. Re-ran production tubing and landed at 10,422'. Swab tested. Ran rods and pump. Pump tested. MOSU 9-17-85. Operations completed 9-20-85.

PAWD: 325 BOPD, 42 BWPD, 180 MCFD

OTS NMOCD, H 1-JRB 1-FJN 1-CMH 1-Mesa

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

SIGNED Clarke M. Kerrey TITLE Administrative Analyst (SG) DATE 9/24/85

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE DATE SEP 26 1985

CONDITIONS OF APPROVAL, IF ANY: