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 10-1-73

5a. Indicate Type of Lease: State [X] Fee [ ]

5. State Oil & Gas Lease No.: L-3674

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 [X] GAS WELL [ ] OTHER-

7. Unit Agreement Name:

2. Name of Operator: AMOCO PRODUCTION COMPANY

8. Farm or Lease Name: State HQ

3. Address of Operator: P. O. Box 68, Hobbs, NM 88240

9. Well No.: 7

4. Location of Well
UNIT LETTER M, 660 FEET FROM THE South LINE AND 660 FEET FROM THE West LINE, SECTION 26 TOWNSHIP 18-S RANGE 34-E NMPM.

10. Field and Pool, or Wildcat: Airstrip Wolfcamp

15. Elevation (Show whether DF, RT, GR, etc.): 3992.5' GR

12. County: Lea

6. 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 [ ]		COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]	CHANGE PLANS [ ]	CASING TEST AND CEMENT JOB [ ]	
OTHER Squeeze and re-perforate and acidize [X]		OTHER [ ]	

7. 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.

Propose to squeeze Wolfcamp perfs to shut off water, re-perf, and acidize if necessary as follows:

Kill well and POH with production equipment. RIH and set cmt retainer at 10600'. Establish injection rate and squeeze Wolfcamp perfs 10666'-10790' w/100 sxs class 'H' w fluid loss add. and 100 sxs class 'H' Tuff plug. Flush cmt to retainer w/61 bbls brine water and reverse out excess cmt., POH, WOC. Drill out cmt retainer and cmt to 10728'. Test squeeze to 1000 psi., POH. RIH and perf

0+5 NMOCD, H 1-JRB 1-FJN 1-GCC 1-Mesa

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

SIGNED Gary C. Clark TITLE Admin. Analyst DATE 4-8-85

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE _____ DATE APR 10 1985

CONDITIONS OF APPROVAL, IF ANY:

Wolfcamp interval 10664'-10700' w/4 JSPF using a 3 1/8" gun. RIH and set pkr at 10600'. Swab well and evaluate production. If stimulation is necessary, acidize with 2000 gals of 15% HCl w/add. Flush acid to bottom perf w/63 bbls of 2% KCl fresh water. Swab back load. POH with tbg and pkr. RIH with production equipment and return well to production.