

OIL CONSERVATION DIVISION
P. O. BOX 2086
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-77

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
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 CEASE OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.

1. ☐ OIL WELL ☐ GAS WELL ☐ OTHER: <u>Water Injection</u>	7. Unit Agreement No.
2. Name of Operator <u>AMOCO PRODUCTION COMPANY</u>	8. Form or Lease Name <u>South Hobbs (GSA) Unit</u>
3. Address of Operator <u>P. O. BOX 3092; HOUSTON, TEXAS 77253</u>	9. Well No. <u>COOP 12</u>
4. Location of well <u>SL/BHL N 636/1300</u> FEET FROM THE <u>South</u> LINE AND <u>2348/2624</u> FEET FROM THE <u>West</u> LINE, SECTION <u>34</u> TOWNSHIP <u>18-S</u> RANGE <u>38-E</u> MPN.	10. Field and Pool, or wildcat <u>Hobbs GSA</u>
11. Elevation (Show whether DP, RT, GR, etc.) <u>3610.6' GR</u>	12. County <u>Lea</u>

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 JOB ☐	

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.

DN1 and RUSU 8-18-88 and pull injection tubing and packer. Run bit and tag at 4395'. Run packer and set at 4180' and acidize from 4244-46, 4250-68, 4274-82, 4292-94, 4298-4310, 4314-16, 4321-26, 4330-32, 4334-44, 4347-51 and 4358 to 4364 with 4575 gallons of 15% NEHCE. Run injection packer and tubing and displace hole with packer fluid. Set packer at 4139' and test to 560 psi for 30 minutes. RD and DNOSU 8-22-88 and return well to injection.

IPWO: 1900 BWIPD at 500 psi.

IAWO: 2550 BWIPD at 110 psi.

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

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

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: