Submit 3 Copies to Appropriate District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

WELL API NO. 30-025-29893

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

## 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.)

7. Lease Name or Unit Agreement Name: South Hobbs (GSA) Unit

1. Type of Well: OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator: Amoco Production Company (Room 18.108)

8. Well No. 222

3. Address of operator: P.O. Box 3092, Houston, Texas 77253-3092

9. Pool name or Wildcat: Hobbs Grayburg San Andres

4. Well Location SL/BHL:
Unit Letter L : 2019/1425 Feet From The South Line and 817/590 Feet From The West Line

Section 34 Township 18-S Range 38-E NMPM Lea, NM County

10. Elevation *(Show whether DF, RKB, RT, GR, etc.)* 3625.2' GL

11. 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 OPNS. ☐ | PLUG AND ABANDONMENT ☐ |
| PULL OR ALTER CASING ☐ | | CASING TEST AND CEMENT JOB ☐ | |
| OTHER: ☐ | | OTHER: Squeeze Zone 1 and Perforate Zones II & III ☒ | |

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.

RUSU (06-02-94) X SDON. R WH X I BOP X POH X TBG X ESP. RIH X 6-1/8 BIT X SCRAPER X BG. TAG @ 4314 X EST INJ RATE. WELL ON VAC XPOH X TBG X SCRAPER X BIT. RIH X PKR X TBG X PKR SA 3973 X LD CSG X TEST 500 PSI X SDOW. ESTB INJ RATE X 2 BPM X 0 PSI. MP 200 SX CLASS C X 10# 20/40 FRAC SN X 2% CACL X TAIL X 150 SX CLASS C X 1.5% CACL .6% FL D-127 X .2% DEFOAMER. NO PRS X WAIT 3 HRS. PMP 200 SX CLSS C X 10# 20/40 FRAC SN X 2% CACL X TAIL X 150 SX CLASS C X 1.5% CACL X .6% FL D-127 X NO PRS. OVER DISP PERFS X 10 BBLS X SION. ESTB INJ RATE 2 BPMX 0 PSI. PMP 75 SX CLASS C 2% CACL X 10#/SX GILSINITE X TAIL X 150 SX CLASS C X 1.5% CACL X .06% FL D-127 X .02% DEFOAMER X WOC 3 HRS. MAX SW PRS 4000 PSI X OPEN BY-PASS ON PKR. REV OUT 98 SX CMT X REL PKR X RESET PKR @ 3373. PRS UP ON CMT X 1500 PSI X WOC. REL PKR X POH X RIH X 6-1/8" BIT X 6 DCS. TAG CMT 3973FT X DO CMT FROM 3973 TO 4092FT (CMT HARD) TAG PBTD 4375FT X CIRC HOLE CLEAN. DISP X 10# BW X TST SQ PERFS 4070-4092 X 750 PSI X LOST 500 PSI X 10 MIN X SDON. PRS TST SQ PERFS 4070-4092 X750 PSI X LOST 450 PSI X 8 MIN. POH X BIT X DCS X TBG. RIH X PKR X TBG TO FIND LEAK. PSA 4004FT X 750 PSI X OK. PSA 4130FT X TST FROM 4130 TO 4375FT X 750 PSI X OK. PSA 3973FT X TST SQ PERFS X 750 PSI. BLED DWN TO 300 PSI X 10 MIN X 2700 PSI X 1/4 BPM. REL PKR X LOWER PKR 4079 X SPOT 250 GAL 7.5% ACD (151FT) RIASE PKR 3880FT X SET PKR X ESTB INJ RATE .5 BPMX 1400 X 1 BPM X 2200 PSI. BROKE TO 1100 PSI X CLEAR PERFS X 4 BBLS. ESTB INJ RATE 3 BPM X 300 PSI X PMP 28 BFW X PMP 100 SX CLASS C X 2#/SX TUFF PLUG X 100 SX CLASS C 2% CACL. MAX SQ PRS 3000 PSI X 30 SX CMT IN PERFS. REVERSE OUT 95 SX CMT X RESET PKR 3252FT. PRS UP ON TBG X 2000 PSI X SDON X WOC. REL PKR XPOH X RIH X 6-1/2" BIT X 6 DCS. TAG CMT 3973FT X DO CMT TO 4082FT. FELL OUT CMT X CIRC HOLE CLEAN. TST SQ PERFS X 750 PSI X OK. SDOW. POH X RIH X WL X RUN DEPTH CONTROL CORRE- LATION LOG FROM 3950FT TO 4370FT. PERF 4 SPF 4135-4156 X 4170-4178 X 418-4218 X 4226-4254 X 4260-4344. RIH X 7" PPI PKR X 4FT SPACING X SDON. ACD NEW PERFS 4135-4344FT X PPI PKR X 4FT SPACING X 8750 GAL 20% ADDITIVES X 50 GAL/FT. MAX TRTP 2500 X AVG TRTP 1800 X AIR 2 BPM. FLUSH X REL PKR X LD 2-7/8" WS X SDON. RIH X ESP EQPT X LOWER 4 JTS X RBXIT. WELL PMP UP X 7 MIN X 80 PSI. RET TO PROD X RDXMO SU (06-15-94)

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

SIGNATURE Devina M. Prince TITLE Staff Assistant DATE 06-24-94

TYPE OR PRINT NAME Devina M. Prince TELEPHONE NO. (713) 366-7686

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE JUL 05 1994

CONDITIONS OF APPROVAL, IF ANY: