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NEW MEXICO OIL CONSERVATION COMMISSION

HOBBBS OFFICE O. C. C.
 902 11 11 35 AM '67

Form C-103
 Supersedes Old
 C-102 and C-103
 Effective 1-1-65

7. Indicate Type of Lease

State ☒ Fee ☐

5. State Oil & Gas Lease No.

739

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Amerada Petroleum Corporation	8. Farm or Lease Name State L "A"
3. Address of Operator P.O. Box 668 - Hobbs, New Mexico	9. Well No. 10
4. Location of Well UNIT LETTER N 1650 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE, SECTION 1 TOWNSHIP 17-S RANGE 36-E NMPM.	10. Field and Pool, or Wildcat Livingston Abo
15. Elevation (Show whether DF, RT, GR, etc.) 3834' DF	12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒
 TEMPORARILY ABANDON ☐
 PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐
 CHANGE PLANS ☐

OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
 COMMENCE DRILLING OPNS. ☐
 CASING TEST AND CEMENT JOB ☐
 OTHER ☐

ALTERING CASING ☐
 PLUG AND ABANDONMENT ☐

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.

Plan to pull rods, pump and tubing. Run 4-3/4" bit in 7-7/8" open hole and drill out Hydromite to original TD of 8435'. Run Caliper log in open hole. Perforate from 8380' to TD with 2 shots per foot. Set formation packer at approx. 8380'. Acidize open hole from 8380' to 8435' with 5000 gals. 15% Reactrol acid containing Soluseal "A" as a fluid loss additive. Stage the treatment using 600# of combination of 2/3 methballs and 1/3 rock salt as diverting agents. Pull tubing and packer. Restore well to production.

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

SIGNED B. J. King TITLE District Superintendent DATE 7-10-67

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: