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LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
B-1553

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 ☐ GAS WELL ☐ OTHER	7. Unit Agreement Name
2. Name of Operator AMOCO PRODUCTION COMPANY	8. Farm or Lease Name <u>State E Tract 18</u>
3. Address of Operator P.O. BOX 68 HOBBS, NEW MEXICO 88240	9. Well No. <u>17</u>
4. Location of Well UNIT LETTER <u>F</u> <u>1650</u> FEET FROM THE <u>North</u> LINE AND <u>2310</u> FEET FROM THE <u>West</u> LINE, SECTION <u>1</u> TOWNSHIP <u>17-S</u> RANGE <u>36-E</u> NMPM.	10. Field and Pool, or Wildcat <u>Lovington Abo</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>8475' RDB</u>	12. County <u>Lea</u>

16. 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 ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	

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 1103.

Propose to perforate additional pay and acidize as follows:
MISU and kill well as necessary with 2% KCl fresh water. POH with cable, tubing, and ESP. Run cement bond log from PBTD - 8000'. Based on cement bond logs, will squeeze the Abo perfor 8,375' - 8,432'. Drill out cement and retainer to 8,390'. Pressure test squeeze to 500psi. Perforate the Abo intervals 8242-68', 8290-8308', 8344-8358', 8375-385' with 4 JSDF. RIH with pin point injection packer with 5' spacing and acidize perfor with 125 gals 15% HCl with additives per setting. POH with tubing and packer. RIH with tubing, cable, and ESP. Land motor at $\pm$ 8120'. Return well to production.

0+5 NMOCB, Hobbs 1-JRB 1-FSN 1-CMH

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

SIGNED Charles M. Herring TITLE Administrative Analyst (SG) DATE 10/21/85

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT 1 SUPERVISOR TITLE _____ DATE OCT 23 1985

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

OCT 22 1985

O.C.D.
HOBBS OFFICE