

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form O-103
Revised 10-1-73

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State	☐	Fee	☒
S. State Oil & Gas Lease No.			

SUNDARY 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 - 11 (FORM O-101) FOR SUCH PROPOSALS.)

OIL WELL ☒	GAS WELL ☐	OTHER ☐	1. Unit Agreement Name
Name of Operator AMOCO PRODUCTION COMPANY			2. Farm or Lease Name Snyder Ranches
Address of Operator P.O. BOX 68 HOBBS, NEW MEXICO 88240			3. Well No. 1
Location of Well UNIT LETTER <u>H</u> , 1980 FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE, SECTION <u>8</u> TOWNSHIP <u>19-S</u> RANGE <u>35-E</u> NMPM.			10. Field and Pool, or Wildcat Scharb Wolfcamp
15. Elevation (Show whether DF, RT, GR, etc.) 3838.1 GL			12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

FORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐
RE-DRILL OR ALTER CASING ☐	OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐	ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOBS ☐	OTHER ☒

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.

MISW 6-12-85. and POH w/ prod equip. RIH w/ 5 1/2" pkr, 2 3/8" SN, and 2 3/8" tbg. Pkr at 10,695'. Spotted 250 gal 20% HCL acid. Flushed w/ 21 bbl 20% KCL FW Pressured to 1000 psi. Pumped 1750 gal 20% HCL acid, 8000 gal 20% HCL acid gelled and 1200 gal 40# gel X-linked 2% KCL FW. Flushed w/ 57 bbl gelled 2% KCL FW. Swabbed well for 1 1/2 hrs and rec 83 BW w/ 20% oil. Rel pkr and POH. RIH w/ 2 7/8" SN, 2 3/8" tail pipe, 5 1/2" tbg anchor and 2 3/8" tbg. SN LA 10,694'. Anchor SA 10,473'. Ran rods and pump. Pres tested pump to 500 psi - OK.

MOSU 6-18-85 and pump tested well through 6-28-85.

PPWO: 8 BOPD x 8 BWPD x 25 MCFD PAWO: 11 BOPD x 3 BWPD x 4 MCFD

O+S NMOC-D-H, 1-IRB, 1-FSN, 1-NLG

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

ORIGINAL SIGNED BY JERRY SEXTON DISTRICT 1 SUPERVISOR	TITLE Administrative Analyst	DATE 4 July 1985
SIGNED BY	TITLE	DATE JUL - 9 1985
CONDITIONS OF APPROVAL, IF ANY:		

RECEIVED

JUL -8 1985

U.S. DEPT. OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION