STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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# OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-7

5a. Indicate Type of Lease: State [X] Fee [ ]

5. State Oil & Gas Lease No.: LG-1546

## 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 [X] GAS WELL [ ] OTHER-

7. Unit Agreement Name:

2. Name of Operator: AMOCO PRODUCTION COMPANY

8. Farm or Lease Name: State MX

3. Address of Operator: P. O. Box 68, Hobbs, New Mexico 88240

9. Well No.: 1

4. Location of Well: UNIT LETTER D, 660 FEET FROM THE North LINE AND 710 FEET FROM THE West LINE, SECTION 15, TOWNSHIP 19-S, RANGE 35-E, NMPM.

10. Field and Pool, or Wildcat: Und. Scharb Bone Sprin

15. Elevation (Show whether DF, RT, GR, etc.): 3783.3' GR

12. County: Lea

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 [ ] | | COMMENCE DRILLING OPNS. [ ] | PLUG AND ABANDONMENT [ ] |
| PULL OR ALTER CASING [ ] | CHANGE PLANS [ ] | CASING TEST AND CEMENT JOB [ ] | |
| OTHER [ ] | | OTHER recompletion operations | [X] |

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.

Fraced 9462'-9472' with 22000 gals FW 2% KCL 40# gelled X-Link, 13000 gals CO2, and 51500 lbs 20/40 Interprop. Flushed with 39 bbls FW 2% KCL and 40# gelled CO2. Ran in hole with tubing, seating nipple, rods and pump. Seating nipple set at 9523' and tubing anchor landed at 9319'. Began pump testing 8-10-84.

O+5-NMOCD,H 1-J. R. Barnett, HOU 21.156 1-F. J. Nash, HOU Rm. 4.206 1-GCC

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

SIGNED Gary C. Clark TITLE Assist. Admin. Analyst DATE 8-13-84

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE DATE AUG 15 1984

CONDITIONS OF APPROVAL, IF ANY: