

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

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

Form C-103
Revised 10-1-7

| | |
|------------------------|--|
| NO. OF COPIES RECEIVED | |
| DISTRIBUTION | |
| SANTA FE | |
| FILE | |
| U.S.O.S. | |
| LAND OFFICE | |
| OPERATOR | |

5a. Indicate Type of Lease
State ☐ Fee ☒
5. 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 L-1 (FORM C-101) FOR SUCH PROPOSALS.

| | |
|---|--|
| 1. OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/> OTHER <input type="checkbox"/> WELL | 7. Unit Agreement Name |
| 2. Name of Operator AMOCO PRODUCTION COMPANY | 8. Farm or Lease Name Peoples Securites Company |
| 3. Address of Operator P. O. Box 68, Hobbs, NM 88240 | 9. Well No. 2 |
| 4. Location of Well UNIT LETTER <u>N</u> <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>3</u> TOWNSHIP <u>19-S</u> RANGE <u>35-E</u> NMPM. | 10. Field and Pool, or Wildcat Und. Scharb Bone Springs |
| 15. Elevation (Show whether DF, RT, GR, etc.) 3853.4' GL | 12. County Lea |

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

SUBSEQUENT REPORT OF:

| | | | |
|--|---|---|---|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | COMMENCE DRILLING CONS. <input type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | OTHER <u>change zones</u> <input checked="" type="checkbox"/> | CASING TEST AND CEMENT JOB <input type="checkbox"/> | |

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.

Pump tested the Wolfcamp for 27 days. Last 24 hrs. recovered 5 BO, 9 BLW and 2 MCF.

Propose to abandon the Wolfcamp and test the Bone Springs formation per the following:
Move in service unit and kill well with clean 2% KCL fresh water. POH. RIH with tubing and CIBP. Set CIBP at 10,280' in 7" casing. Cap with 35' of class C neat cement. Perforate the Bone Springs intervals 9394'-9420', 9432'-9488', and 9496'-9524' utilizing a 4" hollow carrier casing gun with 120° phasing and 2 SPF. RIH with 2-3/8" tubing, treating packer with unloader, and 3 jts. tailpipe. Set packer at 9300'. Swab down to packer. Evaluate production. Run a base GR/Temp. Survey from 9700'-9100'. Release packer and spot 8 bbl of 15% NEFE HCL across Bone Springs perfs 9394'-9524'. Raise tubing and set packer at 9200'. Acidize with 5000 gal of 15% NEFE HCL tagging all acid with RA material and dropping 330 ball sealers. Flush acid to perfs with 45 bbl of 2% KCL fresh water. Run after treatment Gamma Ray/ Temp. survey. Swab back load and evaluate production.

O+5-NMOCD,H 1-R. E. Ogden, HOU Rm. 21.150 1-F. J. Nash, HOU Rm. 4.206 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. Loring TITLE Administrative Analyst DATE 1-27-84

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE JAN 31 1984

CONDITIONS OF APPROVAL, IF ANY: