

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-07587
5. Indicate Type of Lease STATE _____ FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. A-1212-1
7. Lease Name or Unit Agreement Name South Hobbs (GSA) Unit
8. Well No. 22
9. Pool name or Wildcat Hobbs Grayburg - San Andres

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. Type of Well:
 OIL WELL GAS WELL OTHER Water Injector

2. Name of Operator
Amoco Production Company

3. Address of Operator Attn: T G Tullos, M/C 17.166
P O Box 4891, Houston, TX 77210

4. Well Location
 Unit Letter C : 660 Feet From The North Line and 1980 Feet From The West Line
 Section 3 Township 19-S Range 38-E NMPM Lea, NM County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3615' GR

11. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: _____ <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <u>Convert from producer to injector</u> <input type="checkbox"/>

12. 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.

MIRUSU 07/25/96 x fish polish rod x pull x lay down rods x tubing. Load casing x 60 bbls fresh water x pump to 500 lbs x would not hold. Set packer at 4053 x pressure to 500 psi. Dropped 40 psi in 7 minutes x then held o.k. Treated x 3000 gal 20% acid from 4171' to 4193' x well successfully converted to water injection x RDMOSU 07/28/95

Pmx-182

date active

Ward test 4160

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

SIGNATURE *[Signature]* TITLE Sr. Business Analyst DATE 6/24/96

TYPE OR PRINT NAME Tom G. Tullos TELEPHONE NO. 366-7337

(This space for State Use) Orig. Signed by Paul Kautz Geologist TITLE _____ DATE JUL 5 1996

APPROVED BY _____ CONDITIONS OF APPROVAL, IF ANY: _____

7/96

JKBN

dp