

WATER CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-73

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SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

3a. Indicate Type of Lease
State ☐ Fee ☒
3. 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" (FORM C-101) FOR SUCH PROPOSALS.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER: Water Injection	7. Unit Agreement Name
2. Name of Operator AMOCO PRODUCTION COMPANY	8. Farm or Lease Name South Hobbs (GSA) Unit
3. Address of Operator P.O. Box 4072, Odessa, Texas 79760	9. Well No. 35
4. Location of Well UNIT LETTER E 1980 FEET FROM THE North LINE AND 660 FEET FROM THE West LINE, SECTION 3 TOWNSHIP 19-S RANGE 38-E N.M.P.M.	10. Field and Pool, or Wildcat Hobbs GSA
11. Elevation (Show whether DF, RT, GR, etc.) 3613' DF	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 checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPER. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input 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.

MI and RUSU 1-27-88 to acidize well. Pull injection tubing and packer. Run PPIP and 2 3/8" tubing and workstring and tag fill at 4194'. Pull tubing and packer and run 4 3/4" bit, bulldog bailer and tubing. Clean out fill from 4194' to 4208' and pull bit. Run PPIP and tubing and acidize from 4132-43' and 4150'-4209' with 75 gal/ft of 20% NE HCl on 2 foot spacing. Run injection packer and 2 3/8" tubing. Pump packer fluid and set packer at 3846'. Test casing and packer to 750 PSI for 30 minutes and test OK. RD and MOSU 2-1-88 and return well to injection.

IPWO: 2135 BWIPD at 796 PSI
IAWO: 2790 BWIPD at 510 PSI

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

Signed O. M. Mitchell TITLE Sr. Admin. Analyst DATE 02-05-88
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
APPROVED BY _____ TITLE _____ DATE FEB 10 1988
CONDITIONS OF APPROVAL, IF ANY:

NDARS OFFICE
JUL 9 2003
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