we. of contransition OIL CONSERVATION DIVISION DISTRIBUTION P. O. BOX 2088 SANTA FE SANTA FE, NEW MEXICO 37501	Form C-103 · Revised 19-1-73
U.S.G.S. LAND OFFICE OPERATOR	Sa. Indicato Type of Leuse State State Fee X 5. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DAILL ON TO DEEPEN OF PLUG BACK TO A DIFFERENT RESERVOIR. 	7. Unit Agreement Name
AMOCO PRODUCTION COMPANY	8. Farm or Lease Name South Hobbs (GSA) Unit
P. O. Box 68, Hobbs, NM 88240	9. Well No. 35
I. Location of Well UNIT LETTER E 1980 FEET FROM THE North Line and 660 F	10. Field and Pool, or Wildcal Hobbs GSA
THE West LINE, SECTION 3 TOWNSHIP 19-S RANGE 38-E	
15. Elevation (Show whether DF, RT, GR, etc.) 3613 DF	12. County Lea
Check Appropriate Box To Indicate Nature of Notice, Repor NOTICE OF INTENTION TO:	t or Other Data EQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK TEMPORARILY ASANOON PULL OR ALTER CABING CASING CEMENT JOB OTHER	ALTERING CASING
OTHER	

Propose to plugback across the OWC and improve injectivity with acid stimulation. MI and RUSU and release packer and POH with tubing and packer. RIH with workstring and dump bailer and dump sand from 4228-4215. Plug back with Calseal from 4215-4205. Tag plug back and POH. RIH with PPIP with 2 foot spacing and acidize the following intervals with 75 gal of 20% NE HCL with additives per foot of perfs Run packer with RFC valve in place. Intervals to acidize are: 4089-4100, 4107-12, 4132-43 and 4150-4200. Acid to contain 1 gal/1000 gals acid WA-211, 2 gal/1000 WA-212 and 5% by volume G-15. Total acid volume required is 5200 gallons. Pump acid at 1 BPM with maximum surface treating pressure of 1000 PSI. Pull PPIP to 4000 and pull RFC. Flush acid to perfs with 30 bbl clean water. Release packer and POH. RIH with injection packer and tubing and set packer at 3839. Load backside with packer fluid ando pressure test. Return well to injection.

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ORIGINAL SIGNED DISTRICT I	BY JERRY SEXTON	MAY 1 2 1987
AIGNED M MITCHEL	Sr. Admin, Analyst	DATE 5-8-87
id. I hereby certify that the information	above is true and complete to the best of my knowledge and beli	el.



