

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form O-388
Revised 1-1-89

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

DISTRICT II
P.O. Drawer DD, Aramis, NM 88220

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

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

WELL API NO. 30-025-07590
5. Indicate Type of Lease STATE ☐ FEE ☒
6. 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 O-109) FOR SUCH PROPOSALS)

1. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER Water Injection	7. Lease Name or Unit Agreement Name: South Hobbs (GSA) Unit
2. Name of Operator Amoco Production Company	8. Well No. 48
3. Address of Operator P. O. Box 3092, Houston, TX 77253	9. Foot name or Wellhead Hobbs Grayburg - San Andres
4. Well Location Unit Letter <u>J</u> : <u>3300</u> Feet From The <u>North</u> Line and <u>2310</u> Feet From The <u>East</u> Line Section <u>3</u> Township <u>19-S</u> Range <u>38-E</u> NE 1/4 Lea County 10. Remarks (Show whether SP, RBP, RT, GK, etc.) 3619' DF	

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data.

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPER. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Locate and repair casing leak ☒

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.

MI X RUSU - 4/23/92. REL INJ PKR. RBP SA 3822'. LOCATE 7" CSG LEAK BETWEEN 267'-277'. RBP SA 910' X PKR SA 910' X PKR SA 223'. SPOT 2-1/2 BBLs 15% ACD (213'-277') X RESET PKR 192'. TEST TBG IN HOLE - OK. PSA 278' X TST 750 PSI X LOST 550 PSI. REL PKR. RBP SA 519' X PSA 280' X DUMP 2 SX SN ON TOP RBP X SPOT 3 BBL 15% ACD X PSA 174' X PMP 5 BBL ACD THRU LEAK 275' X 1.6 GAL/MIN. PERF 277'-278' X 4 SPF X 1-11/16" CSG PUNCHER. PMP 100 SX CLASS "C" CMT X 2% CACL X CIRC 52 SX CMT X DISP CMT TO 200 FT IN 7" CSG X 500 W X WOC. TAG CMT 176'. DO CMT FROM 176'-295'. TEST OK. INJ PKR SA 4066'. TEST OK.

RD X MOSU - 5/5/92. RET TO INJ.

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

SIGNATURE Kim A. Colvin TITLE Asst. Admin. Analyst DATE 5/22/92
713/
TYPE OR PRINT NAME Kim. A. Colvin TELEPHONE NO. 596-7686

(This space for State Use) SIGNED BY RAY SMITH

APPROVED BY _____ DATE JUN 02 '92
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

JUN 01 1992

CCD HQSRS OFFICE