

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 5-1-89

DISTRICT I
P.O. Box 1900, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Aramis, 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- 07598

5. Indicate Type of Lease

STATE ☐

FED ☒

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 C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER ☐

2. Name of Operator:

Amoco Production Company

3. Address of Operator:

P. O. Box 3092, Houston, TX 77253

4. Well Location:

Unit Letter A : 660 Feet From The North Line and 660 Feet From The East Line

Section 4 Township 19-S Range 38-E NMPM Lea County

10. Elevation (Show whether DP, RKB, RT, GR, etc.)

3618' GL

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 OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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.

RUSU 10/17/90

Acidize perms @ 4100-98 w/5000 gals 20% HCL using rock salt in 3 stages.

RDSU 10/22/90

Return to Production

BWO: 140 BOPD; 1650 BWD; 100 MCFD

AWO: 178 BOPD; 2145 BWD; 25 MCFD

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 1/31/91

TYPE OR PRINT NAME- Kim A. Colvin TELEPHONE 713/596-7686

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONCURRENCE APPROVAL, IF ANY: