

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

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

Form C-103
Revised 10-1-7

5a. Indicate Type of Lease
State ☐ Fee ☒
5. 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. OIL WELL ☐ GAS WELL ☐ OTHER- <u>Injection</u>	7. Unit Agreement Name
2. Name of Operator <u>Amoco Production Company</u>	8. Farm or Lease Name <u>South Hobbs (GSA) Unit</u>
3. Address of Operator <u>P.O. Box 68, Hobbs, NM 88240</u>	9. Well No. <u>34</u>
4. Location of Well UNIT LETTER <u>H</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE, SECTION <u>4</u> TOWNSHIP <u>19-S</u> RANGE <u>38-E</u> NMPM.	10. Field and Pool, or Wildcat <u>Hobbs GSA</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>3617' DF</u>	12. County <u>Dea</u>

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

REMEDIAL WORK ☐
COMMENCE DRILLING OPWS. ☐
CASING TEST AND CEMENT JOBS ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

OTHER Acidize ☒

OTHER ☐

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.

Propose to acidize to increase injectivity as follows:
POH with injection equipment. RIH with PPI pkr and set at 4193'. Acidize below pkr with 1500 gals 15% NE HCl with additives. Flush with 15 bbl water. RIH with retrievable fluid plug and RFC valve. Lower pkr to 4200' and break down 4200-4132, 4126-16, 4107-02, 4092-83 in 2' intervals with 100 gals/interval of 15% NE HCl w/add. Retrieve RFC valve and fluid plug and flush with 35 bbls water. POH with workstring. RIH with injection equipment, set pkr at 3900' and return well to inj. at 1500 BWRD and 100 psi.
0+5 Nmoco, 4 1-JRB 1-FJN 1-GCC 1-PL

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

SIGNED Mary C. Clark TITLE Asst. Admin. Analyst DATE 1-21-85

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT 1 SUPERVISOR

TITLE

DATE

JAN 23 1985

CONDITIONS OF APPROVAL, IF ANY: