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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <u>INJECTION-WELL</u>	5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
2. Name of Operator <u>AMOCO PRODUCTION COMPANY</u>	5. State Oil & Gas Lease No. <u>A-1212</u>
3. Address of Operator <u>BOX 367, ANDREWS, TEXAS 79714</u>	7. Unit Agreement Name
4. Location of Well UNIT LETTER <u>I</u> <u>1980</u> FEET FROM THE <u>SOUTH</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.	8. Farm or Lease (Name) <u>SOUTH HOBBS (GSA) UNIT</u>
	9. Well No. <u>SOUTH HOBBS (GSA) UNIT</u>
	10. Field and Pool, or Wildcat <u>HOBBS-GSA</u>
15. Elevation (Show whether DF, RT, GR, etc.) <u>3614' DF</u>	12. County <u>LEA</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 ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER CONVERT TO INJECTION ☒

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.)

Ran Cement Bond Log.

Deepened from 4195' - 4205'. RALOGS.

Perf: 3984-90, 94-98, 4004-10, 4048-54, 60-62, 76-88, 4104-08'
41-30-40, 50-58, 89-94, w/2JSPF.

ACIDIZED: 4150-80 250 Gal 15% NENCL.

4130-40 " "
4102-08 " "
4076-88 " "
4048-62 1500 gal "
3984-4010 2000 " "

Ran 2 3/8" Plastic coated Tubing w/ Packer set @ 3918'.
Loaded Exp-Tbg annulus w/ 20 gal WA & 40 + 100 Bbl FW.
Installed pressure gauge 0-1000 psi

Well completed & ready for injection 10/25/75.

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

SIGNED Loy Ryakum TITLE ADMINISTRATIVE ASSISTANT

DATE OCT 28 1975

APPROVED BY 1-DIV
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE OCT 28 1975

1-Susp
1-DIV