

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

Form O-103
Revised 12-1-81

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

16. Indicate type of well
State ☐ Fee ☒

17. State oil & gas lease no.

SUNDY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR RE-DEVELOP OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE APPLICATION FOR PERMIT TO DRILL OR RE-DEVELOP FOR SUCH PROPOSALS.

1. ☐ OIL WELL ☐ GAS WELL ☒ OTHER Injection

2. Name of Operator
Amoco Production Company

3. Address of Operator
P.O. Box 68, Hobbs NM 88240

4. Location of well
UNIT LETTER G 1985 FEET FROM THE North LINE AND 1988 FEET FROM
THE East LINE, SECTION 5 TOWNSHIP 19-S RANGE 38-E N.M.P.M.

10. Field and Pool, or Acreage
Hobbs GSA

11. County
Lea

15. Elevation (Show whether DF, RT, GR, etc.)
3634' KB

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
SUBSEQUENT REPORT OF:

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPS. ☐ PLUG AND ABANDONMENT ☐

PULL OR ALTER CASING ☐ OTHER Convert to Injection ☒ CASING TEST AND CEMENT JOBS ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed operations. SEE RULE 110.)

Propose to convert to injection as follows:
POH with rods, pump, and tlg. RIH with an injection pkr and plastic coated tlg. Set pkr at 4010'. Load backside with a corrosion inhibited fluid. Turn the well to injection. Limit the pressure to 100 psi and the rate to 500 BWIPD. Well to be pressure limited.

0+5 NMCD, H 1-J.R. Barnett, Hon Rm 21.156 1-F.J. Nash, Hon Rm 4.206 1-GCC 1-Retro Tex

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

APPROVED BY Harry C. Clark TITLE Asst. Admin. Analyst DATE 10-10-84

ORIGINAL SIGNED BY JERRY NIXON
DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL _____

NOV - 6 1984

RECEIVED

OCT 11 1984

O.C.B.
HOBBS OFFICE