

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

OIL CONSERVATION DIVISION
P.O. Box 2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

Santa Fe, New Mexico 87504-2088

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

WELL API NO. 30-025-07621
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-2656
7. Lease Name or Unit Agreement Name South Hobbs GSA Unit
8. Well No. 187
9. Pool name or Wildcat Hobbs Grayburg San Andres
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3625' GL

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 _____ Water Injector

2. Name of Operator
Amoco Production Company (Room 18.108)

3. Address of operator
P.O. Box 3092, Houston, Texas 77253-3092

4. Well Location
Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East Line
Section 5 Township 19S Range 38E NMPM Lea, NM County

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER: _____ <input type="checkbox"/>	OTHER: <u>Acidize</u> <input checked="" type="checkbox"/>

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.

MIXRU SU (12-07-93) X RTXIB. REL PKR X POH X RIH X BIT X SCRAPER X WS. TAG @ 4181FT X POH X RIH X HOWCO PPI PKR X 2-3/8"WS. ACD PERF 4094-4100 X 4128-4138 X 4150-4154 X 4156-4175 X 2925 GAL 20% X ADDITIVES. 15 GAL/FT X 2FT SPACING. FLUSH X MAX TRTP 2365 X AVG TRTP 2100 X AIR 2 BPM X POH X PKR X RIH X INJ PKR X PC TBG. DISP PKR FL X PSA 3846FT X RBXIT X TST X 550 PSI X OK. RET TO INJ (12-10-93).

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

SIGNATURE Devina M. Prince TITLE Staff Assistant DATE 01-03-94

TYPE OR PRINT NAME Devina M. Prince TELEPHONE NO. (713) 366-7686

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE JAN 07 1994

CONDITIONS OF APPROVAL, IF ANY: