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NEW MEXICO OIL CONSERVATION COMMISSION

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

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-

7. Unit Agreement Name

2. Name of Operator: Amoco Production Company

8. Farm or Lease Name: McKINLEY

3. Address of Operator: BOX 68, HOBBS, N. M. 88240

9. Well No.: 26

4. Location of Well: UNIT LETTER F, 1980 FEET FROM THE NORTH LINE AND 1980 FEET FROM THE WEST LINE, SECTION 5 TOWNSHIP 19-S RANGE 38-E NMPM.

10. Field and Pool, or Wildcat: HOBBS GSA

15. Elevation (*Show whether DF, RT, GR, etc.*): 3624' DF

12. County: LEA

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	☐	PLUG AND ABANDON	☐	REMEDIAL WORK	☒	ALTERING CASING	☐
TEMPORARILY ABANDON	☐			COMMENCE DRILLING OPNS.	☐	PLUG AND ABANDONMENT	☐
PULL OR ALTER CASING	☐	CHANGE PLANS	☐	CASING TEST AND CEMENT JOB	☐		
OTHER	☐			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.

In an effort increase production & reduce high GOR remedial work performed as follows:

Set CI BP @ 4140' and squeezed perforations 4150-64' w/100 Sx cement. 3000# MAX Reversed out 45 Sx.

Perforated interval 4115-28' w/2JSPF. Acidized w/ 1000 gal 15% LSTNE. Evaluated & restored to production.

Prior - Pmp 25 80x 1 BW 24 hrs. GOR 32,190.
after - " 28 " x 15 " 24 " . 155 MCF/G. GOR 5550.

TD - 4225'
PBD - 4140'

OC - 5-9-73
COMP - 5-17-73

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

SIGNED _____ TITLE AREA SUPERINTENDENT DATE MAY 22 1973

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

OK 2 NMOCC-H
1-DIV
1-SUSP
1-RRV