

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-103
Revised 10-1-

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

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>27</u>
4. Location of Well UNIT LETTER <u>E</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE, SECTION <u>5</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>3629' DF</u>	12. County <u>Lea</u>

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 ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	OTHER <u>Acidize to increase injectivity</u> ☒

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.

POH with injection equipment. RIH and set pkr at 4185'. Acidized 4108 - 4180' with 2800 gals of 15% NE HCl w/add. and flushed with 35 bbls water. Ran RFC valve and acidized perfs 4180-76, 72-66, 56-48, 40-33, and 13-08' w/50 gals 15% NE HCl acid per ft. Flushed with 35 bbls water and POH. RIH with injection equipment and set pkr. at 3808'. Tested pkr. to 500 psi for 30 min, OK. Returned well to injection 12-14-84
770 BWPD x TP VAC

015 NMOC, H 1-JRB 1-FJN 1-GCC

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

SIGNED Harry C. Clark TITLE Asst. Admin. Analyst DATE 12-19-84

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

DEC 21 1984

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

DEC 20 1984

DEC 20
HONORS OFFICE