

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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C.L. CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-75

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
B-244

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 <u>South Hobbs (GSA) Unit</u>
3. Address of Operator P. O. BOX 68 HOBBS, NEW MEXICO 88240	9. Well No. <u>119</u>
4. Location of Well UNIT LETTER <u>C</u> <u>330</u> FEET FROM THE <u>North</u> LINE AND <u>2310</u> FEET FROM THE <u>West</u> LINE, SECTION <u>8</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>3612' GL</u>	12. County <u>Lea</u>

10. 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 <u>Convert to injection</u> ☒	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 work) SEE RULE 1103.

Propose to convert to injection as follows: Reference Administrative Order No. AMX-139.
MISU and poh with rods, pump, and tubing. RIH with injection packer and tubing.
Set packer at 3900' and commence injection.

O+5 NMOCD-#1-JRB 1-FJN 1-CMH 1-Shell 1-Arcos 1-Sun

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

SIGNED Charles M. Serrano TITLE ADMINISTRATIVE ANALYST (SG) DATE 12/4/85

ORIGINAL SIGNED BY JERRY SEATON
DISTRICT 1 SUPERVISOR

APPROVED BY _____ TITLE _____ DATE DEC 6 - 1985

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

DEC 5 - 1985

O.C.O.
MOBBS OFFICE