STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

| DISTRIBUTION | | |
|--------------|---|---|
| SANTA FE | | |
| FILE | | |
| U.S.G.S. | | |
| LAND OFFICE | | |
| OPERATOR | 1 | - |

OIL CONSERVATION DIVISION

| DISTRIBUTION P. O. BOX 2088 | Form C-103 Revised 19-1-78 |
|---|---|
| SANTA FE, NEW MEXICO 87501 | Nettoca 13 1 75 |
| rice | 5a. Indicate Type of Lease |
| U.S. O. S. | State Fee X |
| LAND OFFICE OPERATOR | 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. | 7. Unit Agreement Name |
| WELL OTHER Injection | |
| 2. Name of Operator | 8. Farm of Lease Name |
| Amoco Production Company | South Hobbs (GSA) Unit |
| 3. Address of Operator | 9. Well No. |
| P. O. Box 68 Hobbs, NM 88240 | 84 |
| 4. Location of Well | 10. Field and Pool, or Wildcat |
| UNIT LETTER I 1995 FEET FROM THE SOUTH LINE AND 660 FEET FROM | Hobbs GSA |
| | |
| THE East LINE SECTION 9 TOWNSHIP 19-S RANGE 38-E NMPM. | |
| • | |
| 15. Elevation (Show whether DF, RT, GR, etc.) | 12. County |
| 3597 DF | Lea |
| Check Appropriate Box To Indicate Nature of Notice, Report or Ot | her Data |
| NOTICE OF INTENTION TO: SUBSEQUEN | T REPORT OF: |
| | · |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK | ALTERING CASING |
| TEMPORARILY ABANDON COMMENCE DRILLING OPHS. | PLUG AND ABANDONMENT |
| PULL OR ALTER CABING CHANGE PLANS CASING TEST AND CEMENT JQB | |
| 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. | |
| | |
| Propose to increase injectivity by the following method: | |
| | |
| Acidize well with 8000 gallons of 15% NE HCL and 1250# graded rock sa | lt in 30# gelled |
| brine water in 3 stages. Tag acid with radioactive material. Flush w | vith 20 bbls. |
| fresh water. Return well to injection. | |
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| 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. | |
| CN NA CLO | |
| *IGNED TITLE Asst. Admin. Analyst | DATE 7-29-80 |
| Orig. Signed by | |
| | |
| Les Clements Oil & Gas Insp. | JUL 30 7360 |

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Our son server and