

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-103
Revised 10-1-7

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 AMOCO PRODUCTION COMPANY	8. Farm or Lease Name <u>Smith Hobbs (GSA) Unit</u>
3. Address of Operator P.O. BOX 68 HOBBS, NEW MEXICO 88240	9. Well No. <u>78</u>
4. Location of well UNIT LETTER <u>G</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>2310</u> FEET FROM THE <u>East</u> LINE, SECTION <u>10</u> TOWNSHIP <u>19-S</u> RANGE <u>38-E</u> N.M.P.M.	10. Field and Pool, or Wildcat <u>Hobbs (GSA)</u>
11. Elevation (Show whether DF, RT, GR, etc.) <u>3611' DF</u>	12. County <u>Lea</u>

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 OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	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.

MISU 10-14-85. Released packer and POH with injection equipment. RIH with cement retainer and set at 4048'. Cement squeezed with 50SX Class C, 50SX Class C with 4#/5X Tuff Plug, and 250SX Class C Cement. WOC. Re-squeezed with 50SX Class C, 100SX Thixotropic with 4#/5X Tuff Plug, and 75SX Class C Cement. Pulled tubing and WOC. Drilled out cement retainer and cement from 4043'-4180'. Pressure tested casing 1000 psi - ok. Drilled and cleaned out to PBTD 4255'. Perforated 4190'-4226' and 4245'-4252' with 4 JSPP. RIH with PPI packer set for 2 ft spacing and acidized with 100 gals 15% NE HCl per setting. Flushed with 17 BW and POH. Re-ran injection packer and MISU. Returned well to injection. Operations completed 10/23/85.

IAWD: 1490 BWIPD @ 100 psi.

0+5 NMOC, H 1-JRB 1-FJN 1-CMH

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

SIGNED Charles M. Herring TITLE Administrative Analyst (SG) DATE 10/24/85

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT 1 SUPERVISOR

APPROVED BY _____ TITLE _____ DATE OCT 28 1985

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

OCT 25 1985

G.C.D.
HOLDS OFFICE

