NO. OF COPIES RECEIVED	1				Form C-103		
DISTRIBUTION					Supersedes Old C-102 and C-103		
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION				Effective 1-1-65		
FILE	-			г			
U.S.G.S.				1	5a. Indicate Type of Lease		
LAND OFFICE	4			-	State 5. State Oil & G	Fee	
OPERATOR	_				5, State Off & C	as 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 -" (DOMM C-101) FOR SUCH PROPOSALS.)							
<u> </u>					7. Unit Agreeme	ent Names V IIVIA	
OIL GAS WELL OTHER THIECTION WELL					7. Unit Agreement Name'S UNIT SOUTH HOBBS (GSA) UNIT		
2. Name of Operator					8. Farm of Lease Name SOUTH HOBBS (GSA) UNIT		
AMOCO PRODUCTION COMPANY 3. Address of Operator					9. Well No.		
BOX 367, ANDREWS, TEXAS 79714					10. Field and Pool, or Wildcat		
UNIT LETTER H . 330 FEET FROM THE MORTH LINE AND 330 FEET FROM					HOBBS GSA		
_				EEI FROM	mm	ıniititin	
THE EAST LINE, SECTI	10N TOWNS	нір <u>19</u>	-S range 38-E	NMPM.			
	15. Elevation (Show whether	DF, RT, GR, etc.) - D E		12. County LEA		
16.	<u> </u>	<u> </u>	<u> </u>				
		Indicate N	Nature of Notice, Repor			<u>-</u> .	
NOTICE OF I	NTENTION TO:		2082	EQUENT	REPORT OF	•:	
PERFORM REMEDIAL WORK	PLUG AND	ABANDON	REMEDIAL WORK		ALTE	ERING CASING	
TEMPORARILY ABANDON			COMMENCE DRILLING OPNS.		PLUG	AND ABANDONMENT	
PULL OR ALTER CASING	CHANGE PL	ANS	CASING TEST AND CEMENT JOB		1	00/	
			OTHER ONUERT	70/	NJECTI	$O/Y \longrightarrow X$	
OTHER							
17. Describe Proposed or Completed O	perations (Clearly state all	pertinent det	l ails, and give pertinent dates,	including e	stimated date o	f starting any proposed	
work) SEE RULE 1103.	ul from.	4127-	4128'				
Cleaned of Kan eemer	Le Contraction de la contracti	Dices	, , ,				
Kan elmer	u oona	eog.		,		4	
acidized of	perforation	MO 2	1081-4126	W/10	000 G 4	L 15%.	
acidized of Lan Plastic	Coated tu	bing:	packer w/	pack	er Set	@ 4021.	
Louded Cap	ma i tubin	a an	nulus W/50£	3W +1	o and u	relaid	
Londed cash	vellard 87%	57	,				
Installed of	Dressure q	rauge	e, on annu	eus			
	•	•					
Will complet	ud & read	ly for	injection	1-15	16		
•	,						
\wedge	•						
18. I hereby certify that the information	n above is true and complet	e to the best	of my knowledge and belief.				
	,						
XMIX GO	addin (by)		MINISTRATIVE ASSISTA	ANT	DATE JA	N 2 3 1976	
TIONED THE	Jerry Sexion	TITLE					
0+2-NMOCC-47	Dist 1. Supv.				0	Maria and and	
APPROVED BY		TITLE			DATE	AN 39 63	
CONDITIONS OF APPROVAL, IF AN	Y:	•.					
1-RRY							
′ /						•	