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OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

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-

2. Name of Operator
AMOCO PRODUCTION COMPANY

3. Address of Operator
BOX 367, ANDREWS, TEXAS 79714

4. Location of Well

UNIT LETTER ___J___, _1650_ FEET FROM THE _SOUTH_ LINE AND _2310_ FEET FROM

THE _EAST_ LINE, SECTION _10-_ TOWNSHIP _19-S_ RANGE _38-E_ NMPM.

7. Unit Agreement Name
SOUTH HOBBS (GSA) UNIT

8. Farm or Lease Name
SOUTH HOBBS (GSA) UNIT

9. Well No.
88

10. Field and Pool, or Wildcat
HOBBS-GSA

15. Elevation (Show whether DF, RT, GR, etc.)
3590 DF

12. County
LEA

16. **Check Appropriate Box To Indicate Nature of Notice, Report or Other Data**

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER _Repairs-Casing Leak Survey_ ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER _____
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐
☐

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.

In an effort to eliminate subsurface fluids from the surface casing propose to place appy. 75 sk. Class "C" cement in annular space between 12½" CSA 210' and 9" CSA 2720'.

TD= 4170'

OH: 3975-4170'

7" CSA 3975'
9" CSA 2720'
12½" CSA 210'

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

SIGNED _Roy R. Yoakum_ TITLE _ADMINISTRATIVE ASSISTANT_ DATE **OCT 7 1975**

Of 2- NMOCC-H
I- DIV
APPROVED BY
L-SUSP
CONDITIONS OF APPROVAL, IF ANY:
I-RRy

Orig. Signed by
Les Clossin
Oil & Gas ...

TITLE _____ DATE _____