

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.

30-025-23530

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. 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. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Amoco Production Company

3. Address of Operator

P. O. Box 3092 Houston, TX 77253

4. Well Location

Unit Letter C : 663 Feet From The North Line and 1935 Feet From The West Line

Section 3 Township 19-S Range 38-E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3609' GL

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: Deepen well within interval ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. 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.

MIRU, pull ESP x production tubing. Repair equipment as necessary. RIH with 4-3/4" bit and drill out to 4320'/. Rig up loggers and log 2320'-4320' with GR-CNL-CAL. RIH with workstring x PPI pkr @ 4' setting x set pkr @4200'. Acidize open hole w/2500 gals. 20% NE HCl x Additives (WA211, WA 212) in 3 stages using 300 lbs rock salt to divert. Acidize perfs w/50 gal/ft 20% NE HCl x additives using ppi pkr @ 2BPM. Perfs 4150'-4171'; 4198'-4200'; 4210'-4212'; 4219'-4222'; 4226'-4228'; 4232'-4236'; 4238'-4241'; 4242'-4244'; 4253'-4266'
Flush to bottom w/50 bbl water x POH
Rerun production equipment, RDSU, return well to production.

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

SIGNATURE Amelia Hartman

TITLE Asst. Admin. Analyst

DATE 02/08/90

TYPE OR PRINT NAME Amelia Hartman

(713)
TELEPHONE NO. 584-7442

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

FEB 13 1990

RECEIVED
FEB 12 1990
OCD
HODAS OFFICE