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

Form C-103
Revised 10-1-73

3a. Indicate Type of Lease
State ☐ Fee ☒
3. 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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Water Injection	7. Unit Agreement Name
2. Name of Operator AMOCO PRODUCTION COMPANY	8. Farm or Lease Name South Hobbs (GSA) Unit
3. Address of Operator P.O. Box 4072, Odessa, Texas 79760	9. Well No. 112
4. Location of Well UNIT LETTER M 585 FEET FROM THE South LINE AND 710 FEET FROM THE West LINE, SECTION 3 TOWNSHIP 19-S RANGE 38-E N.M.P.M.	10. Field and Pool, or Wildcat Hobbs GSA
15. Elevation (Show whether DF, RT, GR, etc.) 3614' KB	12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	

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 1503.

MI and RUSU to acidize well to increase injectivity. Release packer and pull injection tubing and packer. Run workstring and PPIP to 4110 and acidize from 4124' to 4228' with 5400 gallons 20% NE NCl. Run injection tubing and packer and pump packer fluid. Set packer at 3895 and test casing and packer to 520 PSI for 30 minutes and test OK. RD and MOSU 8-26-87 and return to injection.

IPWO: 519 BWIPD AT 758 psi
IAWO: 1154 BWIPD AT 789 psi

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

SIGNED <u>Eddie W. Seay</u> Eddie W. Seay Oil & Gas Inspector	TITLE <u>Sr. Admin. Analyst</u>	DATE <u>9-11-87</u>
APPROVED BY <u>SEP 17 1987</u>	TITLE	DATE

CONDITIONS OF APPROVAL, IF ANY: