

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

54. Indicate Type of Lease
State ☐ For ☒
5. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REDEVELOP OR PLUG BACK TO A DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT - C-101 FOR SUCH PROPOSALS.)

1. OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/> OTHER <input type="checkbox"/> WELL	7. Unit Agreement Name
2. Name of Operator Amoco Production Company	8. Farm or Lease Name Capps
3. Address of Operator P. O. Box 68, Hobbs, NM 88240	9. Well No. 32
4. Location of well UNIT LETTER <u>L</u> <u>2026</u> FEET FROM THE <u>South</u> LINE AND <u>516</u> FEET FROM THE <u>West</u> LINE, SECTION <u>3</u> TOWNSHIP <u>19-S</u> RANGE <u>38-E</u> N.M.P.M. Hobbs Drinkard	10. Field and Pool, or wildcat
11. Elevation (Show whether LF, RT, GR, etc.) 3609.9' GL	12. County Lea

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 OPS. <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 1103.

Moved in service unit 4-18-82. Pulled rods and pump. Pumped hot oil down tubing and circulated wellbore with 450 bbl 2% KCL formation water. Installed blowout preventer and pulled tubing. Ran packer, seating nipple, and tubing. Set packer at 6626'. Filled casing with 2% KCL water. Ran base temp. and gamma ray logs. Acidized as follows in 4 stages: (1) Pumped 2000 gal 40#, gelled 2% KCL brine water; (2) pumped 4000 gal 15% NE HCL acid; (3) pumped 2000 gal 40# gelled 2% KCL brine water; and (4) pumped block of 500# graded rock salt. Repeated for 4 stages. Flushed with 40 bbl 2% KCL formation water. Ran after treatment survey. Pulled tubing and packer. Ran tubing, tubing anchor, rods and pump. Moved out service unit 4-20-82. Pump tested for 144 hrs. and pumped 35 BLO, 9 BO, 25 BNO, 1121 BLW, 81 BW, and 306 MCF. Returned well to production,

0+4-NMOCD, H 1-Hou 1-SUSP 1-CLF

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

SIGNED Cathy L. Forman TITLE Asst. Admin. Analyst DATE 5-3-82

ORIGINAL SIGNED BY

APPROVED BY JERRY SEXTON TITLE _____ DATE MAY 5 1982

CONDITIONS OF APPROVAL