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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-73

5a. Indicate Type of Lease: State [X] Fee [ ]

5. State Oil & Gas Lease No.: A-1646-5

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.)

7. Unit Agreement Name

OIL WELL [ ] GAS WELL [ ] OTHER- Injection

2. Name of Operator: AMOCO PRODUCTION COMPANY

8. Farm or Lease Name: South Hobbs (GSA) Unit

3. Address of Operator: P.O. BOX 68 HOBBS, NEW MEXICO 88240

9. Well No.: Coop #1

4. Location of Well: SL/BHL UNIT LETTER B, 200/9 FEET FROM THE North LINE AND 1380/1288 FEET FROM

10. Field and Pool, or Wildcat: Hobbs GSA

THE East LINE, SECTION 6 TOWNSHIP 19-S RANGE 38-E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.): 3626.6' 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 [ ]	PLUG AND ABANDON [ ]	REMEDIAL WORK [ ]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]		COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]	CHANGE PLANS [ ]	CASING TEST AND CEMENT JOB [ ]	
OTHER [ ]		OTHER Acidized Well [X]	

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.

MISU 7-3-85. and POH w/ tbg and pkr. RIH w/ PPI pkr and 2 3/8" workstring. Tested pkr to 2000 psi - OK. Dropped RFC value. Acidized perfs 4239'-34', 4230'-07', 4198'-92', 4187'-84', and 4182'-79' in 2' intervals, w/ 2000 gal 15% NE HCL acid w/ add. Flushed with 18 BW. Retrieved RFC valve, pulled tbg and pkr to 4175', and overflushed w/ 35 BW. POH w/ tbg and pkr. RIH w/ plastic coated 2 3/8" tbg and pkr. Set pkr at 4040'. Loaded and prs tested backside to 500 psi - OK. MOSU. 7-5-85.

Finaled W.O. 7-9-85.

IPWO: 312 BWIPD at 100 PSI

IAWO: 1475 BWIPD on Vac.

045 NMOCD-H, 1-JRB, 1-FJN, 1-NLG

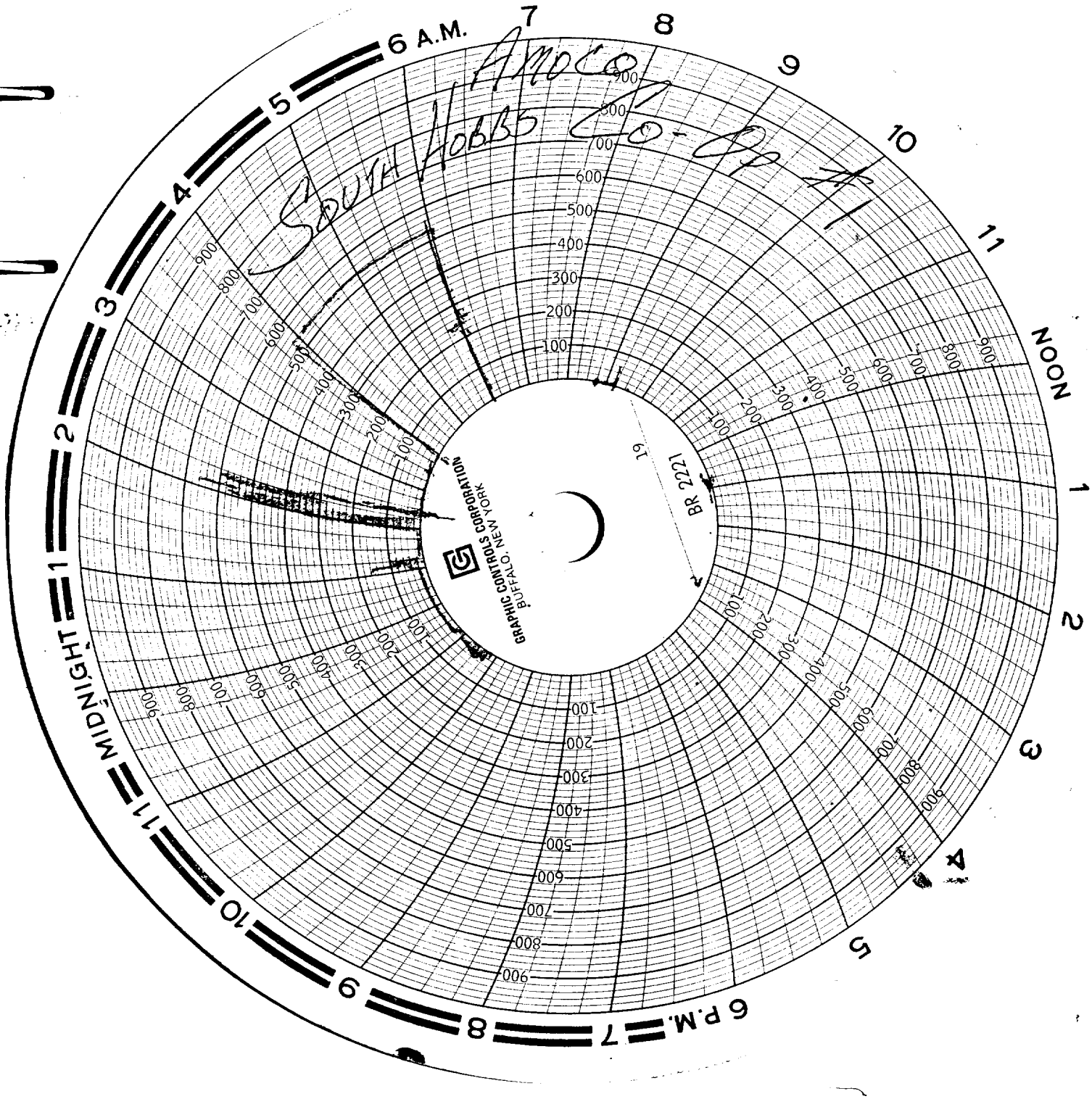
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED [signature] TITLE Administrative Analyst DATE 13 July 1985

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE JUL 17 1985

CONDITIONS OF APPROVAL, IF ANY:


Amoco
South Hobbs
6 A.M.
NOON
6 P.M.
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