

OIL CONSERVATION DIVISION

P.O. Box 2083
Santa Fe, New Mexico 87504-2083

STRICTLY
O. Box 1989, Hobbs, NM 88240

STRICTLY
O. Drawer 80, Artesia, NM 88210

STRICTLY
O. Box 8000 R.A., Artesia, NM 87410

WELL API NO.

30-025- 28336

1. Indicate Type of Lease.

STATE ☐

FED ☒

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 9-101) FOR SUCH PROPOSALS.

Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER ☐

Name of Operator:

Amoco Production Company

Address of Operator:

P. O. Box 3092, Houston, TX 77253

7. Lease Name or Unit Agreement Name

South Hobbs (GSA) Unit

8. Well No.

132

9. Field name or Widened

Hobbs Grayburg - San Andres

Well Location:

1790/

SL/BHL

H

1400

Foot From The

North

Line and

1185/1236

Foot From The

East

Line

Section-

4

Township-

19-S

Range-

38-E

NMPM

Lea

County

10. Elevation (Show whether SP, RLL, RT, GR, etc.)

3614.9' GR

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 ☐

CHANGE PLANS ☐

COMMENCE DRILLING OPERATIONS ☐

PLUG AND ABANDONMENT ☐

WELL OR ALTER CASING ☐

CASING TEST AND CEMENT JOB ☐

OTHER ☐

OTHER: Perf & Acidize

☒

2. 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.

RUSU 4/1/91

Perf intervals 4190 - 4210, 4252 - 4270, 4280 - 4300 with 4 SPF.

Acidize new perfs using 2900 gals 20% NE HCL in 3 stages X 1000# Rock Salt.

RDSU 4/4/91

Return to production

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

SIGNATURE: Kim A. Colvin TITLE: Asst. Admin. Analyst

DATE: 5/15/91

TYPE OR PRINT NAME: Kim A. Colvin

713/
TELEPHONE: 596-7686

(This space for Date Check)

APPROVED BY: TITLE: DATE:

COMMENTS OF OPERATOR, IF ANY:

MAY 21 1991