

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-103
Revised 10-1-78

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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

API 300252 834100

5a. Indicate Type of Lease	
State ☒	Fee ☐
5. State Oil & Gas Lease No.	
A-1212-1	

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. ☒ OIL WELL ☐ GAS WELL ☐ OTHER-		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 3092; Houston, TX 77253		9. Well No. 138
4. Location of Well SL/BHL I 2490/2628 FEET FROM THE South LINE AND 173/47 FEET FROM THE East LINE, SECTION 4 TOWNSHIP 19-S RANGE 38-E NMPM.		10. Field and Pool, or WHdcat Grayburg/San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 3612.3' GL		12. County Lea

16. 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 ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒	ALTERING CASING ☐
COMMENCE DRILLING OPWS. ☐	PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐	OTHER ☐

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 1703.

MI and RUSU 12/15/88. Acidize gross interval 4112 - 4225 with 4160 gallons of 20% NEFE HCl using PPI packer at 4 foot spacing. Flush with 30 barrels water and return to production. MOSU 12/16/88.

BWO 92 x 540
AWO 116 x 680

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

SIGNED <u>Blake T. Steele</u>	TITLE <u>Administrative Analyst</u> DATE <u>4/14/89</u>
Orig. Signed by <u>Paul Kautz</u> Geologist	TITLE _____
APPROVED BY _____	DATE <u>APR 18 1989</u>

CONDITIONS OF APPROVAL, IF ANY: