

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-103
Revised 10-1-78

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 - II" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	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 68, Hobbs, NM 88240	9. Well No. 141
4. Location of Well UNIT LETTER <u>K</u> <u>1478</u> FEET FROM THE <u>South</u> LINE AND <u>2595</u> FEET FROM THE <u>West</u> LINE, SECTION <u>4</u> TOWNSHIP <u>19-S</u> RANGE <u>38-E</u> NMPM.	10. Field and Pool, or Wildcat Hobbs GSA
11. Elevation (Show whether DF, RT, GR, etc.) 3605.5' GL	12. County Lea

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

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER status update ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

Pump tested for 15 days. Last 24 hours pumped 40 BO, 65 MCFD, and 205 BW. Completed as oil well 11-28-83. Currently pumping.

0+5-NMOCD,H 1-R.E.Ogden, Hou 1-F.J.Nash, Hou 1-CLF 1-Texaco 1-Sun
1-Shell 1-Petro Lewis

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

SIGNED Cathy L. Farman

TITLE Asst. Admin. Analyst

DATE 12-12-83

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____

TITLE _____

DATE

DEC 13 1983

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

DEC 12 1983

O.C.D.
HOBBS OFFICE