

STATE OF NEW MEXICO
AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-73

SUNDARY 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.

☒ GAS WELL ☐ OTHER

Operator

AMOCO PRODUCTION COMPANY

Address of Operator

P.O. BOX 68 HOBBS, NEW MEXICO 88240

Location of Well

IT LETTER Ø 1310 FEET FROM THE South LINE AND 1370 FEET FROM
East LINE, SECTION 4 TOWNSHIP 19-S RANGE 38-E N.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)

3610.5' GL

State ☒ Fee ☐

5. State Oil & Gas Lease No.

A-1212-1

7. Unit Agreement Name

8. Name of Lease Name

South Hobbs (GSA) Wind

9. Well No.

142

10. Field and Pool, or Wildcat

Hobbs GSA

12. County

Lea

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

FORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
L OR ALTER CASING ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

OTHER Acidized Well ☒

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 6-18-85 and POH w/ prod equip. RTH w/ 5 1/2" PPI pkr and SA 4007. Tested to 2000 psi - OK. Dropped RFC valve. Rel pkr, ran tbg, and reset pkr at 4198'. Pumped 1550 gal 15% NE HCL acid in 1' intervals w/ 50 gal/interval: 4198'-95', 4178'-71', 4169'-63', 4160'-57', 4145'-37', and 4124'-20'. Flushed w/ 24 bbl. 29% KCL FW. Fished RFC valve. Unable to fish standing valve. POH w/ tbg and pkr. RTH w/ pkr and SA 4002. Acidized w/ 2000 gal 15% NE HCL. Flushed w/ 27 bbl water. Rel pkr and POH. RTH w/ SN and tbg. Tbg LA 4207. Ran rods and pump. Tested pump to 500 psi - OK. MOSU 6-20-85 and pump tested through 7-1-85. PPWO: 140 BOPD X 172 BWPD X 110 MCFD, PAWO: 156 BOPD X 306 BWPD X 0 MCFD

015 NMOCD 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.

ORIGINAL SIGNED BY JERRY LENTON
DISTRICT SUPERVISOR

TITLE Administrative Analyst

DATE 4 July 1985

JUL - 9 1985

COPIES OF APPROVAL, IF ANY:

TITLE

DATE