

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-7

5a. Indicate Type of Lease
State ☐ Fee ☒
5. 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 C-101) FOR SUCH PROPOSALS.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. Unit Agreement Name
2. Name of Operator AMOCO PRODUCTION COMPANY	8. Form or Lease Name South Hobbs (GSA) Unit
3. Address of Operator P.O. BOX 68, HOBBS, NEW MEXICO 88240	9. Well No. 151
4. Location of Well SL/BHL B/N 710/22 FEET FROM THE North/South LINE AND 2410/2471 FEET FROM THE East/West LINE, SECTION 10/3 TOWNSHIP 19-S RANGE 38-E NMPM.	10. Field and Pool, or Wildcat Hobbs GSA
15. Elevation (Show whether DF, RT, GR, etc.) 3603.1' 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 ☐

REMEDIAL WORK ☒
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER ☐

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.

MISU 3-28-86. Pulled rods x pump. Pulled tubing. Perforated 4316'-20'
4324'-29', 4331'-38', 4342'-47' x 4349'-51' x 4 JSPP. Ran
tubing x packer set at 4221'. Acidized x 3000 gallons 15%
NE FE HCL gelled acid. RIH x rods x tubing x pump.
INPE x returned well to production.
PPWO: 28 BOPD x 267 BWPD
PAWO: 77 BOPD x 540 BWPD

0+5: NMOCD-HOBBS; 1-J.R.BARNETT HOU RM. 21.156; 1-E.J. NASH HOU RM. 4.206; 1-BAO

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

SIGNED Beverly A. Ottwell

TITLE SR. ADMINISTRATIVE ANALYST

DATE 4-7-86

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____

TITLE _____

DATE APR 9 - 1986

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
APR 8 1986
C-10
MCBBS OFFICE