

Submit 3 Copies

to Appropriate
District Office

State of New Mexico

Energy, Minerals and Natural Resources Department

Form C-103

Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.	30-025-28360
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	A-1212-1
7. Lease Name or Unit Agreement Name	South Hobbs GSA Unit
8. Well No.	157
9. Pool name or Wildcat	Hobbs Grayburg San Andres

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. Type of Well	OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator	Amoco Production Company (Room 17.182)
3. Address of operator	P.O. Box 3092, Houston, Texas 77253-3092
4. Well Location SL/BHL	Unit Letter D 1245/1269 Feet From The North Line and 1245/1295 Feet From The West Line Section 10 Township 19S Range 38E NMPM Lea, NM County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3605.7 GR	

11.

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 OPNS. ☐ PLUG AND ABANDONMENT ☐
 CASING TEST AND CEMENT JOB ☐
 OTHER: **Acidize** ☒

12. 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.

MIRUSU 7-20-93 X INST BOP X POH X TBG X LD ESP. RIH X BIT X SCRAPER X TBG X TAG X 4258'. POH X TBG X SCRAPER X BIT. RIH X PKR X TBG X SET PKR X 4108'. TST CSG X 500 PSI X OK. SET LINES X3000 PSI X ACD X 5000 GAL 20% NE HCL X 2 STAGES X 1500 GAL X 400# SALT X 3500 GAL X 75 BBL. FLUSH X AVG TRTP 1900 X MAX TRTP 20280 X AIR 3.2 BPM. ISIP 1300 X 15 MIN X 730 X REL PKR X POH X LD 2-3/8" TBG. RIH X 2-7/8" MUD ANCHOR X PMP BBL X 2-7/8" TBG R BOP X ITH X RI X 2-1/4" PLGR X 1" RODS X 3/4" RODS. FIN RIH X 7/8" RODS X PR X RDSU 7-23-93. RETURN WELL TO PROD.

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

SIGNATURE Devina M. Prince TITLE Staff Assistant DATE 08-09-93
 TYPE OR PRINT NAME Devina M. Prince TELEPHONE NO. (713) 596-7686

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____
 CONDITIONS OF APPROVAL, IF ANY: AUG 13 1993

