

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-103
Revised 10-1-77

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 <i>Injection</i>	7. Unit Agreement Name
2. Name of Operator <i>AMOCO PRODUCTION COMPANY</i>	8. Farm or Lease Name <i>South Hobbs (GSA) Unit</i>
3. Address of Operator <i>P.O. BOX 68 HOBBS, NEW MEXICO 88240</i>	9. Well No. <i>172</i>
4. Location of Well UNIT LETTER <i>H</i> <i>1980</i> FEET FROM THE <i>North</i> LINE AND <i>635</i> FEET FROM THE <i>East</i> LINE, SECTION <i>9</i> TOWNSHIP <i>19-S</i> RANGE <i>38-E</i> NMPM.	10. Field and Pool, or Wildcat <i>Hobbs GSA</i>
15. Elevation (Show whether DF, RT, GR, etc.) <i>3600' GR</i>	12. County <i>Lea</i>

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 ☐
OTHER ☐

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

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

17. Describe the 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 10-18-85. Released packer and P.O.H. Plugged back with 15 SX sand and 8' Cal Seal to 4160'. RIH with cement retainer and set at 4055'. Squeezed with 50 SX class C, 50 SX Class C with 4# / SX Tuff Plug, and 50 SX class C Cement. Reversed out 40.8 SX, pulled out of hole, and WOC. Drilled out cement and retainer to 4150'. Pressure tested 1000 psi - ok. Chased out Cal Seal and sand to 4275'. Perforate 4144-160' with 435PF. Ran PPI packer and acidized in 2' intervals from 4226-4150' with 2000 gals 15% NE HCL acid. Flushed with 48 BW. Re-ran injection equipment. Packer set at 4015'. MOSU 10-23-85. Commenced injection 10/24/85. Operations completed 10/26/85.
IAWD: 470 BWIPD.

0+5 NMOC-D-H 1-JRB 1-FJN 1-CMH

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

SIGNED *Charles M. Herring*

TITLE *Administrative Analyst (SG)*

DATE *10/28/85*

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR

APPROVED BY

TITLE

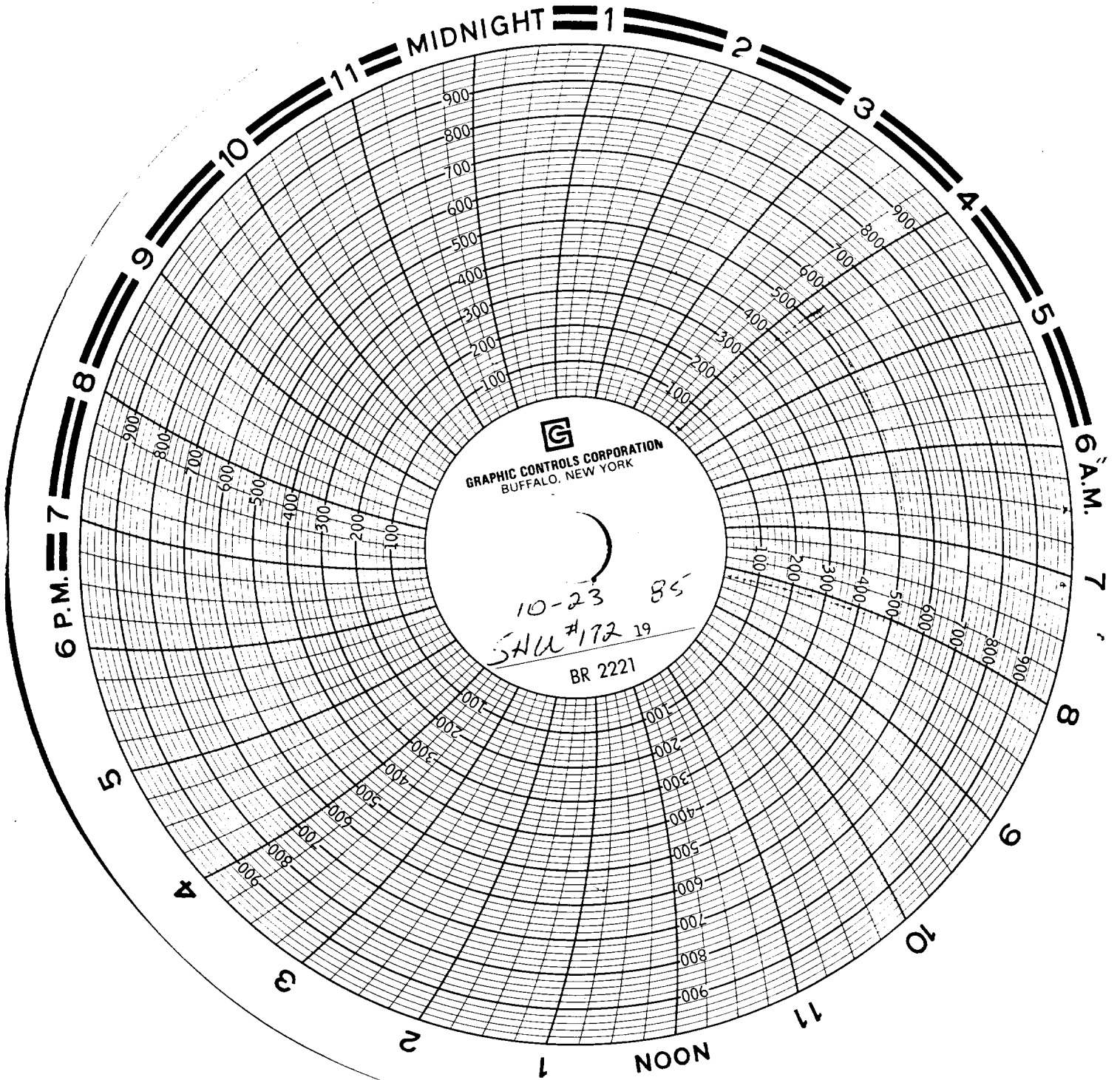
OCT 30 1985

CONDITIONS OF APPROVAL, IF ANY:

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OCT 29 1985

O.C.D.
HOBBS OFFICE



RECEIVED

OCT 29 1985

F. B. I.
HONOLULU OFFICE