

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-

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

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	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 NM 88240</i>	9. Well No. <i>177</i>
4. Location of well UNIT LETTER <i>D</i> <i>592</i> FEET FROM THE <i>North</i> LINE AND <i>416</i> FEET FROM THE <i>West</i> LINE, SECTION <i>5</i> TOWNSHIP <i>19-S</i> RANGE <i>38-E</i> N.M.P.M.	10. Field and Pool, or wildcat <i>Hobbs GSA</i>
15. Elevation (Show whether DF, RT, GR, etc.) <i>3621.8' GR</i>	12. County <i>Lea</i>

16. 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 ☐

SUBSEQUENT REPORT OF:

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

Drilled to TD of 4330' and on 11-18-84 set 5 1/2", 15.5#, K-55 csg. Csg set at 4330'. External csg per set at 1392'. Cemented with 750 svs class A w/add and tailed in with 125 svs class C neat. Plug down 6:30 p.m. and circulated 144 svs. Rig released 1:00 p.m. 11-19-84. Csg. test will be performed when MISU. No further report until MISU.

7-5 NMOCB, H 1-J.R. Barnett, Han 1-F.J. Nash, Han 1-GCC 1-Texas 1-Sun 1-Shell 1-Retro Lewis 2-Arco

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

SIGNED *Gary C. Clark* TITLE *Asst. Admin. Analyst* DATE *11-20-84*

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