

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

Form C-103
Revised 10-1-

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LAND OFFICE	
OPERATOR	

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 <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 *Spud* ☒
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.

Well was spud 10/31/84 and drilled starting hole of 40'. On 10/31/84 set 40' of 14" conductor in a 26" hole. Cemented with 4 yds. Redi-mix TOT Rig #5 moved in on 11-4-84 and began continuous drlg operation 8:30 A.M. 11-6-84 with a 12 1/4" bit. Drilled to TD of 1475' and on 11/7/84 set 8 5/8", 24", K-55 csg. Csg. set at 1475' and cmt with 875 sxs Class C with additives. Plug down 8:15 p.m. 11-7-84 and circulated out 387 sxs. WOC 18 hrs and tested csg to 600 psi, OK. Reduced bit to 7 7/8" and resumed drilling.

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

SIGNED *Harry C. Clark* TITLE *Asst. Admin. Analyst* DATE *11-12-84*

APPROVED BY *ERRY SEXTON*

REGISTERED SUPERVISOR

APPROVED BY _____ TITLE _____ DATE *NOV 1 1984*

CONDITIONS OF APPROVAL, IF ANY: