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 10-1-78

5a. Indicate Type of Lease: State [X] 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 [X] GAS WELL [ ] OTHER-

7. Unit Agreement Name

2. Name of Operator: Amoco Production Company

8. Farm or Lease Name: South Hobbs (GSA) Unit

3. Address of Operator: P.O. Box 68, Hobbs, NM 88240

9. Well No.: 188

4. Location of Well: UNIT LETTER K, 1493/1467 FEET FROM THE South LINE AND 1802/1518 FEET FROM THE West LINE, SECTION 5, TOWNSHIP 19-S, RANGE 38-E, NMPM.

10. Field and Pool, or Wildcat: Hobbs GSA

15. Elevation (Show whether DF, RT, GR, etc.): 3615.5' GR

12. County: Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK [ ]	PLUG AND ABANDON [ ]	REMEDIAL WORK [ ]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]		COMMENCE DRILLING OPNS. [ ]	PLUG AND ABANDONMENT [ ]
PULL OR ALTER CASING [ ]	CHANGE PLANS [ ]	CASING TEST AND CEMENT JOB [ ]	
OTHER Fracture stimulate [X]		OTHER [ ]	

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.

Propose to fracture stimulate the Grayburg as follows:
MISU and POH with production equipment. RIH with RBP and pkr. Set RBP at 4180', set pkr at 4150'. Pressure test RBP to 3000 psi and pull pkr. Perforate Grayburg 3966'-4004' and 4024'-4040' w/4JSPF and a 3 1/8" gun. RIH with pkr and 2 1/8" tbg, set pkr at 3800'. Frac down tbg w/5500 gals of linear HPG gel and 7000 lbs 20/40 sand. Shut in overnight. POH with pkr and tbg. Clean sand off RBP and POH. Rerun production equipment and return well to production.

0+5 NMOCD, 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 Gary C. Clark TITLE Admin. Analyst DATE 10-8-85

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE _____ DATE OCT 10 1985

CONDITIONS OF APPROVAL, IF ANY: