

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

Form 10-103
Revised 10-1-73

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.
B-2656

SUNDARY 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 AMOCO PRODUCTION COMPANY		8. Farm or Lease Name South Hobbs (RSA) Unit
3. Address of Operator P. O. Box 68, Hobbs, NM 88240		9. Well No. 189
4. Location of Well UNIT LETTER J 1685 FEET FROM THE South LINE AND 2475 FEET FROM THE East LINE, SECTION 5 TOWNSHIP 19-S RANGE 38-E N.M.P.M.		10. Field and Pool, or Wildcat Hobbs GSA
15. Elevation (Show whether D.F., RT, GR, etc.) 3614.8' GR		12. County Lisa

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 ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☒	OTHER ☐

7. 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.

Dry drilled to TD of 4315', circ, and TOH. RIH with open ended drill pipe to 2982' and ran three arm caliper 4070'-2982'. Laid down drill pipe. Ran 5 1/2", 15.5 #, K-55 csg. Csg set at 4311'. DV tool at 3490' and pumped 50 bbls freshwater spacer, 60 sxs self stress I w/add. Plug down 9:15 p.m. 2-13-85. WOC 4 hrs, opened DV tool and pumped 100 bbls 10" brine, gained returns. Circulated and cleaned hole. Pumped 50 bbl fresh water spacer, 400 sxs self stress I, and 1600 sxs self stress I w/add. Displaced with 83 bbls 10" brine, closed DV tool and circ 73 sxs to pit. Plug down 4:00 A.M. 2-14-85. Directional survey and casing test to be performed when MISH 075 NMCD, H 1-JRA 1-FIN 1-GCC 1-Tex 1-Sun 1-Shell 1-PL 2-Arco

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

SIGNED **Mary C. Clark** TITLE **Asst. Admin. Analyst** DATE **2-14-85**
ORIGINAL SIGNED BY **JERRY SEXTON**
DISTRICT 1 SUPERVISOR
APPROVED BY _____ TITLE _____ DATE **FEB 18 1985**
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

FEB 15 1985

O.C.B.
HOBBS OFFICE