

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Aramis, NM 88210

DISTRICT III
1000 Rio Scurra Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025- 29750
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. A-1212-1
7. Lease Name or Unit Agreement Name South Hobbs (GSA) Unit
8. Well No. 211
9. Pool name or Wildcat Hobbs Grayburg - San Andres

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 G-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL WELL ☒ GAS WELL ☐ OTHER ☐	
2. Name of Operator Amoco Production Company	
3. Address of Operator P. O. Box 3092, Houston, TX 77253	
4. Well Location SL/BHL 1790/ Unit Letter F/E 1594 Feet From The North Line and 1420/904 Feet From The West Line Section 5 Township 19-S Range 38-E NMMPM Lea County	
10. Elevation (Show whether DP, RKB, RT, GR, etc.) 3623' DR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data.	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☒
PLUG AND ABANDON ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	COMMENCE DRILLING OPNS. ☐
CHANGE PLANS ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	CASING TEST AND CEMENT JOB ☐
OTHER: ☐	OTHER: ☐

12. 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.

RUSU 9/28/90

Acidize perms @ 4163-73 w/4500 gals 20% HCL using a PPI packer @ 4' spacing

RDSU 10/1/90

Return to production

BWO: 24 BOPD; 1884 BWD; 24 MCFD

AWO: 37 BOPD; 2650 BWD; 13 MCFD

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

SIGNATURE Kim A. Colvin TITLE Asst. Admin. Analyst DATE 1/31/91
713/
TELEPHONE 596-7686

TYPE OR PRINT NAME Kim A. Colvin

(This space for State Use) ORIGINAL SIGNED BY LARRY SEXTON

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