

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

OIL CONSERVATION DIVISION
P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088

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

WELL API NO.	30-025-31212
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. 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. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Lease Name or Unit Agreement Name South Hobbs (GSA) Unit
2. Name of Operator Amoco Production Company (Room 17.182)	8. Well No. 228
3. Address of operator P.O. Box 3092, Houston, Texas 77253-3092	9. Pool name or Wildcat Hobbs Grayburg San Andres
4. Well Location Unit Letter D : 660 Feet From The North Line and 1140 Feet From The West Line Section 5 Township 19S Range 38E NMPM Lea, NM County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3625' GR	

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Acidize ☒

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.

MIRUSU (8/2/93) X RTXIB X PTG X ESP EQPT X RIH X BIT X SCRAPER X TBG X TAG AT 4300' X POH. RIH X PKR X TBG X PSA 4075' X LOAD X TST X 500 PSI X ACD X 5000 GAL 20% X ADDITIVES X AVG TRTP VAC X AIR 1.3 BPM X ISIP VAC X REL PKR X POH X RIH X ESP EQPT X TBG X RBXIT X WELL PMP UP IN 20 MIN X 60 PSI. RDMOSU (8/4/93) X RET TO PROD.

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

SIGNATURE Devina M. Prince TITLE Staff Assistant DATE 08-24-93

TYPE OR PRINT NAME Devina M. Prince TELEPHONE NO. (713) 596-7686

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE **AUG 31 1993**

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

AUG 30 1993

**INTELLIGENCE
OFFICE**