

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
Santa Fe, New Mexico 87504-2088

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

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

WELL API NO.	30-025-31427
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.)		7. Lease Name or Unit Agreement Name South Hobbs (GSA) Unit
1. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	8. Well No. 231	
2. Name of Operator Amoco Production Company (Room 17.182 W1)	9. Pool name or Wildcat Hobbs Graburg San Andres	
3. Address of operator P.O. Box 3092, Houston, Texas 77253-3092		
4. Well Location Unit Letter F 1562 Feet From The North Line and 2100 Feet From The West Line Section 4 Township 19-S Range 38-E NMPM Lea, NM County	10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3614.8' GR	

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

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.

- 1) MI. RUSU.
- 2) POH X R X PMP X TBG
- 3) RIH X CIBP X SA 4000'
- 4) CAP CIBP X 50' CMT (CHECK X NMOCD)
- 5) RDSU

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 10-15-93
TYPE OR PRINT NAME Devina M. Prince TELEPHONE NO. (713) 366-7686

(This space for State Use)

Orig. Signed by
Paul Kantz
Geologist

APPROVED BY _____ TITLE _____ DATE OCT 21 1993
CONDITIONS OF APPROVAL, IF ANY: