

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.

30-025-31430

5. Indicate Type of Lease

STATE ☐

FEE ☒

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 ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Amoco Production Company

(Room 18.108)

8. Well No.

237

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 S-2P : 34/1300 Feet From The

West/South Line and

647/15 Feet From The South/East Line

Section 4 34/83

Township RS

18S

Range

38E

NMPM

Lea, NM

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3620.2' GL

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.

MIXRU SU (11-23-93) X PRXP X RTXIB X PTG X RIH X BIT X SCRAPER X TBG X TAG AT 4298FT X PULL ABU PERFS. FIN POH X TBG X BIT X SCRAPER X RIH X PKR X TBG X PSA 4066FT X LOAD X TST X ACD PERFS 4124-4260 X 5000 GALS 20% X ADDITIVES X 3 STAGES X 2000 GALS X 400# SALT X 2000 GALS X 600# SALT X 1000 GALS X FLUSH X MAX TRTP 130 X AVG TRTP 80 X AIRA 5 BPM X ISIP 0 X REL PKR X PH X RIH X PROD TBG. FIN RIH X TBG X RBXIT X PRXP X LOAD TST X RET TO PROD. RDXMO SU (11-29-93).

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 01-03-94

TYPE OR PRINT NAME

Devina M. Prince

TELEPHONE NO. (713) 366-7686

(This space for Stamp)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

FEB 23 1994