

N. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

1. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
2. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Form or Lease Name State "GC"
9. Well No. 1
10. Field and Pool, or Wildcat Wildcat Morrow
11. County Lea

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.
(SEE APPLICATION FOR PERMIT - 17 (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>
1. Name of Operator Amoco Production Company
2. Address of Operator P. O. Box 68 - Hobbs, NM 88240
3. Location of Well UNIT LETTER 0 660 FEET FROM THE South LINE AND 1980 FEET FROM THE East LINE, SECTION 7 TOWNSHIP 22-S RANGE 35-E N.M.M.
15. Elevation (Show whether DF, RT, GR, etc.) 3603.0 GL

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

4. 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.

Pulled tubing and packer. Perforated Morrow 13130'-85'. Acidize with 1000 gal 7 $\frac{1}{2}$ % MS acid with additives. Swab tested and released rig. Moved out service unit 6-10-80. Currently flow testing.

0 + 4 - NMOCD,H 1 - Hou 1 - Susp 1 - LBG

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

SIGNED <u>Bob L Davis</u>	TITLE <u>Admin. Analyst</u>	DATE <u>7/2/80</u>
APPROVED BY <u>Jerry Sexton</u>	TITLE <u>Dist. L. Supv.</u>	DATE <u>JUL 7 1980</u>

CONDITIONS OF APPROVAL, IF ANY: