

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATION	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-77

5a. Indicate Type of Lease

State ☐Fee ☒

5. 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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. Unit Agreement Name
2. Name of Operator AMOCO PRODUCTION COMPANY	8. Farm or Lease Name Southland Royalty A
3. Address of Operator P.O. BOX 68 HOBBS, NEW MEXICO 88240	9. Well No. 2
4. Location of well UNIT LETTER <u>B</u> <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>9</u> TOWNSHIP <u>21-S</u> RANGE <u>37-E</u> NMPM.	10. Field and Pool, or Wildcat Blinberry, Drk, Tubb - DHC
15. Elevation (Show whether DF, RT, GR, etc.) 3482' DF	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

OTHER ☐

17. 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.

MISU 8-2-85. POH with rods, pump, and tubing. Cleaned out to 6690'. RIH with packer and set at 5670'. Acidized with 8000 gals 15% HCl and flushed with 22 BFW 2% KCl. POH with tubing and packer. Re-ran production equipment with seating nipple set at 6528'. MISU 8-14-85 and pump tested. Pump stuck, MISU 8-16-85. POH with rods and pump. Steamed tubing and ran paraffin knife. Swabbed 4 hrs and recovered 880 and 5 BW. Fluid cleaned up. Laid down swab. Re-ran production equipment and MISU 8-26-85. Pump tested. Operations completed 10/28/85.

PAWD: 24 BOPD, 33 BWPD, 144 MCFD.

0+5 NMOCD-H 1-JRB 1-FJN 1-CMH

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

SIGNED Charles M. HerringTITLE Administrative Analyst (SG)DATE 10/29/85ORIGINAL SIGNED BY JERRY SEXTONAPPROVED BY DISTRICT ENGINEER

TITLE _____

DATE OCT 31 1985

CONDITIONS OF APPROVAL, IF ANY: