

WATER CONSERVATION DIVISION
P. O. BOX 2080
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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LAND OFFICE	
OPERATOR	

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 TO DRILL (FORM C-101) FOR SUCH PROPOSALS.

1. Name of Operator Amoco Production Company		5a. Indicate Type of Lease State ☒ For ☐
2. Address of Operator P.O. Box 68 Hobbs, NM 88240		5b. State Oil & Gas Lease No. B-1553
3. Location of Well UNIT LETTER N 430 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE, SECTION 18 TOWNSHIP 21-S RANGE 37-E N.M.P.M.		6. Unit Agreement Name
4. Elevation (Show whether DF, RT, GR, etc.) 3526.7 GR		7. Field or Lease Name State E Tr. 27
5. County Lea		8. Well No. 1
6. Field and Pool, or Wildcat Blinebry		9.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☒	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	OTHER Test Blinebry ☒

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.

Ran a retrievable bridge plug set at 6016'. Topped with 10' sand. Perforated 5774'-5778', 5800'-5803', 5848'-5851', 5938'-5942' with 2 JSPF. Ran tubing and packer. Packer set at 5600'. Acidize with 3400 gallons 15% NE acid. Ran base temperature survey. Fraced in 3 stages with 33,000 gallons gelled brine with 33,000# 20/40 sand and 1000 gallons 15% NE acid and 2200# rock salt. Flow tested 10 days. Installed pump equipment and currently pump testing.

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

SIGNED Lay Cox TITLE Admin. Supervisor DATE 9-24-79

Orig. Signed by
Jerry Sexton
Dist. 1, Supv.

APPROVED BY _____ TITLE _____ DATE SEP 28 1979

CONDITIONS OF APPROVAL, IF ANY:

0+4-NMOCD-H 1-Hou 1-Susp 1-BD