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# NEW MEXICO OIL CONSERVATION COMMISSION

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

OCT 5 11 35 AM '66

|   |                              |
|---|------------------------------|
| 5a. Indicate Type of Lease                |                              |
| State <input checked="" type="checkbox"/> | Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.              |                              |
| B-934                                     |                              |

## 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.)

|   |  |  |
|---|--|--|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- Converted to Water Injection Well.                                  |  | 7. Unit Agreement Name                           |
| 2. Name of Operator<br>Humble Oil & Refining Company  |  | 8. Farm or Lease Name<br>New Mexico State M      |
| 3. Address of Operator<br>Box 2100, Hobbs, New Mexico 88240   |  | 9. Well No.<br>16                                |
| 4. Location of Well<br>UNIT LETTER J 1980 FEET FROM THE South LINE AND 1980 FEET FROM<br>THE East LINE, SECTION 29 TOWNSHIP 22-S RANGE 37-E NMPM. |  | 10. Field and Pool, or Wildcat<br>Langlie-Mattix |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br>3368 DF  |  | 12. County<br>Lea                                |

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 checked="" type="checkbox"/> * | ALTERING CASING <input type="checkbox"/>      |
| TEMPORARILY ABANDON <input 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"/>  | OTHER <input type="checkbox"/>            | CASING TEST AND CEMENT JOB <input type="checkbox"/> |   |
|  |   | *Additional recovery area<br>R-2891 of 4-8-65.      |   |

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.

Moved in and rigged up company unit. Pulled rods and tubing. Released company unit. Moved in and rigged up contract unit. Sand pumped to TD. Perf. 2-7/8" casing at 3621, 3627, 3644, 3648, 3661, 3664 and 3665 with one radio active jet shot per depth, selective fired. Killed well with water. Ran tubing and packer. Set packer at 3615. Acidized perf. 3621-3665 with 1,000 gals of 15% N. E. acid with an average injection rate of 4.8 BPM. Max. press. 1500#. Min. press. 1500#. Job by Dowell. Pulled tubing and packer. Found hole above packer. Ran plastic coated tubing and Camco packer. Packer set at 3615. Pumped into lower perf. (3621-3665) with company hot oil unit with an average injection rate of 2 BPM with 100# pressure. Reset Camco packer at 3532. Put inhibited water on annulus side of well. Well recompleted as a water injection well thru perf. 3570, 3578, 3590, 3610, 3621, 3627, 3644, 3648, 3661, 3664 and 3665.

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

SIGNED \_\_\_\_\_ TITLE Dist. Adm. Supvr, DATE 10-1-65

APPROVED BY [Signature] TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: