

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State ☒ Fee ☐

5. State Oil & Gas Lease No.
B-2616

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Amoco Production Company	8. Farm or Lease Name State "D" 14
3. Address of Operator P. O. Box 68, Hobbs, New Mexico	9. Well No. 2
4. Location of well UNIT LETTER P 660 FEET FROM THE South LINE AND 510 FEET FROM East THE LINE, SECTION 16 TOWNSHIP 24-S RANGE 37-E N.M.P.M.	10. Field and Pool, or Whdeat Fowler-Upper Yeso
15. Elevation (Show whether DF, RT, GR, etc.) 3248 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 ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:
REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☐
ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

Propose to repair well per the following:
Move in service unit and pull tubing and anchor. Perforate Upper Yeso interval 5240'-47', 5262'-68', 5271-73', and 5278'-89' with 4 JSPF. Run in hole with retrievable bridge plug and set at 5305' in 5-1/2" casing. Set packer at 5050'. Run before treatment temperature survey. Pump 2500 gallons 15% NE acid tagged with radioactive material and flush to perfs with 31 barrels of 2% KCL water. Run after treatment temperature survey. Swab test well and evaluate.

0+5-NMOCD,A 1-HOU 1-DMF 1-W. Stafford, HOU

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

SIGNED [Signature] TITLE Assist. Admin. Analyst DATE 11-4-82

ORIGINAL SIGNED BY
APPROVED BY JERRY SEXTON TITLE DISTRICT 1 SUPER. DATE NOV 8 1982

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
NOV 5 1982
O.S.P.
HOBAS OFFICE