

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form Approved.
Budget Bureau No. 42-R1424

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 Form 9-331-C for such proposals.)

1. oil well ☒ gas well ☐ other ☐

2. NAME OF OPERATOR
Amoco Production Company

3. ADDRESS OF OPERATOR
P. O. Box 68 - Hobbs, NM 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 2080' FSL & 660' FEL, Sec. 29
AT TOP PROD. INTERVAL: (Unit 1, NE/4, SE/4)
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

☒
☐
☐
☐
☐
☐
☐
☐
☐

5. LEASE
NM-20370

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Federal "AZ"

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
Brushy Draw Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
29-26-30

12. COUNTY OR PARISH
Eddy

13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
2980.6 GR

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

On 6-18-80 McVay Drilling Company (Rig #4) spudded a 17-1/2" hole at 11:00 a.m. Drilled to a TD of 950' and ran 13-3/8" casing set at 950'. Cemented with 1100 sx Class C cement with 2% CACL. Plugged down at 2:25 a.m. 6-20-80. Circulated 216 sx. WOC 25 hrs. Tested casing with 800# for 30 min. Test OK. Reduced hole to 12-1/4" and resumed drilling.

RECEIVED

JUL 8 1980

O. C. D.

Set ARTESIA, OFFICE Ft.

Subsurface Safety Valve: Manu. and Type

18. I hereby certify that the foregoing is true and correct

SIGNED Bob Davis

TITLE Admin. Analyst

DATE 7/1/80

(This space for Federal or State office use)

APPROVED BY W. V. CHESTER

CONDITIONS OF APPROVAL, IF ANY:

0 + 4 - USGS-A 1 - Hou 1 - Susp 1 - LBG