

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on
reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM-077002

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Nellis Federal

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

Und. Gates - Seven Rivers

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

6-19-33

12. COUNTY OR PARISH

Lea

13. STATE

NM

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—" 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, NEW MEXICO 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

*1980' FNL x 1980' FNL
(UNIT F, SE/4, NW/4)*

14. PERMIT NO.

3002526091

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3699.7' GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐

PULL OR ALTER CASING

☐

FRACTURE TREAT

☐

MULTIPLE COMPLETION

☐

SHOOT OR ACIDIZE

☐

ABANDON*

☐

REPAIR WELL

☐

CHANGE PLANS

☐

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐

REPAIRING WELL

☐

FRACTURE TREATMENT

☐

ALTERING CASING

☐

SHOOTING OR ACIDIZING

☐

ABANDONMENT*

☒

(Other)

Re-entry
(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

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.)

*MISU 12-6-85. Ran 8 3/4" bit and drilled out cement plugs and stringers to 66'.
Ran bit to 4089'. RTH w/CIBP and set at 4050'. Pressure tested casing 1000psi for 30
mins-ok. Capped CIBP w/25' class C cement. Perforated 3530'-60' w/4 DPJS PF.
Set packer at 3411' and swabbed 2 hrs. Acidized with 3200 gals 7 1/2% NEFE HCl acid and
210 ball sealers. Swab tested and recovered 9 BOW/good show of gas. MISU 12-17-85.
Well left shut in pending additional work on well.*

ACCEPTED FOR RECORD

SwD

JAN 2 1986

CARLSBAD, NEW MEXICO

0 + 5 BLM C, 1 - JRB, 1 - FJN, 1 - CMH

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

SIGNED

Charles M. Herring

TITLE *Administrative Analyst (SG)*

DATE *12/30/85*

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side