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NEW MEXICO OIL CONSERVATION COMMISSION

Form O-101
 Supersedes Old
 O-102 and O-101
 Effective 1-1-65

1. Indicate Type of Lease Date <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
2. State Oil & Gas Lease No. B-1553
3. Name of Lease Owner
4. Name of Lessee Name State E Tr. 27
5. Well No. 2
6. Field and Pool, or Wellbore Und. Drinkard
7. County Lea

SUNDRY NOTICES AND REPORTS ON WELLS

DATE RECEIVED: _____

FILE NO.: _____

UNIT: _____

Amoco Production Company
 P. O. Box 68, Hobbs, NM 88240

UNIT CENTER: M 330 FEET FROM THE South LINE AND 880 FEET FROM THE West LINE, SECTION 18 TOWNSHIP 21-S RANGE 37-E

15. Location (Show a Section DE, RE, GR, etc.)

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 Suspend <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPER. <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"/>	
		OTHER _____ <input type="checkbox"/>	

Provide a brief description of the work performed, including all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. SEE RULE 1103.

Moved in service unit 3/15/80. Ran a cast iron bridge plug set at 6400'. Capped with 35' cement. Perforated 5756'-60', 5792'-5802', 5850'-54', 5924'-32', 5980'-86', 6040'-48' with 2 JSPF. Ran tubing, packer, and tailpipe. Packer set at 5491'. Tailpipe at 5616'. Acidized with 10,000 gallons 15% HCL acid. Flushed with 38 bbls. 2% KCL water. Swab tested 3 days. Fraced with 15,000# 20/40 sand and 4000# 10/20 sand. Currently swab testing.

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

Signed by: *Bob Davis* Administrative Analyst DATE: 3/25/80

Approved by: Jerry Sexton Dist 1, Supv. DATE: _____

CONDITIONS OF APPROVAL, IF ANY: 0+4 NMOCD - H; 1 - Houston; 1 - Suspense; 1 - BD