

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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.)
330 FNL X 330 FEL, Sec. 6
AT SURFACE:
AT TOP PROD. INTERVAL: (Unit A, NE/4, NE/4)
AT TOTAL DEPTH:
- 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

- | | |
|--|-------------------------------------|
| REQUEST FOR APPROVAL TO: | SUBSEQUENT REPORT OF: |
| TEST WATER SHUT-OFF <input type="checkbox"/> | <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| REPAIR WELL <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | <input type="checkbox"/> |
| MULTIPLE COMPLETE <input type="checkbox"/> | <input type="checkbox"/> |
| CHANGE ZONES <input type="checkbox"/> | <input type="checkbox"/> |
| ABANDON* <input type="checkbox"/> | <input type="checkbox"/> |
| (other) _____ | _____ |

- 5. LEASE
NM-031332
- 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
- 7. UNIT AGREEMENT NAME
- 8. FARM OR LEASE NAME
Pike Federal
- 9. WELL NO.
1
- 10. FIELD OR WILDCAT NAME
Drinkard *Drinkard*
- 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
6-23-38
- 12. COUNTY OR PARISH
Lea
- 13. STATE
NM
- 14. API NO.
- 15. ELEVATIONS (SHOW DF, KDB, AND WD)
3358 GL

RECEIVED

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

JUL 13 1979
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

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.)*

Propose to increase production of the Drinkard Zone by acidizing pay with 1500 gals. 15% NE-HCL acid.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct
SIGNED *Ray Cox (Cotton Cove)* TITLE A. S. DATE 7/13/79

(This space for Federal or State office use)

APPROVED BY _____ DATE _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:
0 + 4 - USCS-H 1 - Susp
1 - Houston
1 - CC

*See Instructions on Reverse Side

APPROVED
JUL 13 1979
ACTING DISTRICT ENGINEER