

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 cement 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. Drawer "A", Levelland, TX 79336

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980 FSL & 1980 FEL, Sec.12(Unit J,
AT TOP PROD. INTERVAL: NML, SE 1/4)
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 type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input 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) Extension	<input checked="" type="checkbox"/>		<input type="checkbox"/>

5. LEASE
NM-1235-d

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Bondurant Federal

9. WELL NO.
5

10. FIELD OR WILDCAT NAME
West Tonto Penn Morrow

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
12-19-32

12. COUNTY OR PARISH
Lea

13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3649.5 GR

RECEIVED

(NOTE: Report required on completion or zone change on Form 9-330.)

DEC 15 1978
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.)*

Request extension of drilling permit for 90 days.

Requesting operations have
been completed, this drilling approval
expires 3-20-79

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

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

SIGNED Annies Earls TITLE Assit. Admin. Analyst DATE 12-14-78

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

0+4-USGS-H
1-Houston
1-Susp
1-DE

*See Instructions on Reverse Side

APPROVED
DEC 15 1978
ACTING DISTRICT ENGINEER

1951
MAY 10 1951
U.S. AIR FORCE

RECEIVED
MAY 10 1951
U.S. AIR FORCE