

N. M. OIL & GAS
P. O. BOX 1000
HOBBS, N. M. 88240

Form Approved.
Budget Bureau No. 42-R1424

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, New Mexico 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 660' FNL X 1980' FEL
AT TOP PROD. INTERVAL: (Unit B, NW/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 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 checked="" type="checkbox"/> |
| ABANDON* <input type="checkbox"/> | <input type="checkbox"/> |
| (other) <input type="checkbox"/> | <input type="checkbox"/> |

5. LEASE
NM-40452
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Federal BY
9. WELL NO.
1
10. FIELD OR WILDCAT NAME
Wildcat Wolfcamp
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
14-18-32
12. COUNTY OR PARISH
Lea
13. STATE
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3825.0 GL

(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.)*

Moved in swab unit 12-31-82. Swab tested 10 hours. Recovered 4 BO and 64 BW. Moved out swab unit. Moved in service unit 1-4-83. Killed well with 50 barrels 10# brine. Released packer and pulled tubing. Ran CIBP and set at 10484'. Tested to 500 psi. Tested OK. Capped CIBP with 35' of cement. Pulled up to 5052 and circulated with 2% KCL water. Pulled up to 5020 and spotted 10 barrels 10% acetic acid. Perforated Delaware intervals 4962'-72' and 4980'-90' with 4 JSPF. Ran in hole with tailpipe, 2-7/8" tubing, packer, and on/off tool. Packer set at 4780' and tailpipe landed at 4881'. Swab tested 2-1/2 hours. Recovered 28 BLW. Acidized well with 2000 gallons 15% NEFE HCL tagged with radioactive material. Flushed with 31 barrels of water. Swab tested 26 hours. Recovered 68 barrels of load water. Moved out service unit 1-11-83. Rigged up wireline unit 1-15-83. Ran bottom hole pressure test. Bottom hole pressure 0+6 BLM, R 1-HOU 1DMF 1-W. Stafford, HOU (over)

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

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

SIGNED Mark Freeman TITLE Ast. Adm. Analyst DATE 1-27-83

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY: _____
(ORIG. SGD.) DAVID R. GLASS

JAN 28 1983
MINERALS MANAGEMENT SERVICE
ROSWELL, NEW MEXICO

RECEIVED
JAN 28 1983

OIL & GAS
MINERALS MGMT. SERVICE
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side

636 psi. Moved out wireline unit 1-15-83. Well SI until additional work is performed.

RECEIVED
JAN 31 1983
O.C.D.
HOBBS OFFICE