

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLI  
(Other instructions  
verse side)

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

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		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' FEL, Sec 24 Unit G, SW/4 NE/4		5. LEASE DESIGNATION AND SERIAL NO. LC-031736 (a)		6. IF INDIAN, ALLOTTEE OR TRIBE NAME		7. UNIT AGREEMENT NAME H. M. OIL CONS. COMMISSION P. O. BOX 1580 HOBBS, NEW MEXICO		8. FARM OR LEASE NAME GAMMA "A" Federal		9. WELL NO. 11		10. FIELD AND POOL, OR WILDCAT Eunice Monument GSA		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 24-20-36		12. COUNTY OR PARISH LEA		13. STATE NM	
14. PERMIT NO.				15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3553' RDB																					

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)			

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other) Open add'l pay by deepening			<input checked="" type="checkbox"/>

(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.)\*

MISW 1-3-85 and install BOP. and POH w/ prod. equipment.

RIH w/ 6 1/4" bit and bulldog bailer. CO from 3855'-65'. DO to 3911'  
POH w/ bit, bailer, DC, and tbg. RIH w/ SN and 2-7/8" tbg. to 1000'  
to rec 430 BLW. R tbg to 3867 and ran Base Temp Survey. Lower tbg  
to 3890' and spot 210 gal. 15% NEFE HCL. POH w/ tbg and RIH w/ 7"  
fullbore pkr and 2-7/8" tbg. PSA 3714'. Acidized w/ 3000 gal 15% NEFE  
HCL and 300 gal 20# gel brine and 450 # rock salt. Tagged acid w/  
radio active material. Flushed w/ 29 BW and R after treatment survey.  
Swabbed well for 2hrs. Rel pkr and POH w/ pkr and tbg. R- 3 arm  
caliper log 3906'- 3700'. RIH w/ 5 3/8" PIP, SN, and 2-7/8" tbg to  
3849'. R Gamma Ray Correlation log 3848'- 3500'. Pmp 12 BW x prs up

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

SIGNED Ther L. Gates TITLE Administrative Analyst DATE 23 April 1985

(This space for Federal or State office use)

APPROVED BY ACCEPTED FOR RECORD TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

0+5 BLM, C ; 1- JRB, 1-FJN, 1-NLG

APR 26 1985

\*See Instructions on Reverse Side

CAPISHAD NEW MEXICO

to 200 psi and set pkr. Acidized w/ 2000 gal 15% NEFE HCL  
and 300# gal 20# gel brine and 450#'s rock salt. in 3  
Stages. Flushed w/ 25 BW. Pumped 110 BW down csg  
while acidizing. R-swab for 2hr, Swabbed dry, and ran  
swab every hr for 10 hrs. POH w/ tbg and RIT w/ 2-3/8"  
tbg. Landed tbg at 3812' and installed production equipment.  
MOSU 1-10-85 and begin pump testing. Pump tested through 4-16-85.  
Production after W.O. = 3 BO, 50 BW, and 4 MCF in 24 hrs.

RECORDED

APR 29 1985

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