

NEW MEXICO OIL CONSERVATION OFFICE
HOBBS OFFICE

MAR 30 1 09 PM '66

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U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
B-1382-1

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL GAS WELL OTHER

2. Name of Operator
Amerada Petroleum Corporation

3. Address of Operator
P. O. Box 668 - Hobbs, New Mexico

4. Location of Well
UNIT LETTER **M** **660** FEET FROM THE **South** LINE AND **660** FEET FROM
THE **West** LINE, SECTION **18** TOWNSHIP **19S** RANGE **37E** NMPM.
10. Field and Pool, or Wildcat
Monument

15. Elevation (Show whether DF, RT, GR, etc.)
3706' DF

12. County
Lea

16. 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 ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <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"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Pulled rods, pump and tubing. Acidized Grayburg zone perfs. 3975' to 3990' with 1000 gals. 15% NE acid. Swab tested. Ran tubing, rods and pump and resumed production.

**Test 3-18-66 -
24 Hrs. Pumped 7.86 BO & .43 BW on 12-1/4" SPM. GOR 12,985**

**Test 3-25-66
24 Hrs. Pumped 56.52 BO & 9.97 BW on 12-1/4" SPM. GOR 4328**

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

SIGNED *D.C. Apple* TITLE District Superintendent DATE 3-28-66

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: