

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. LC-032450-B
2. Name of Operator Amoco Production Company	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P. O. Box 3092, Houston, TX 77253 (Rm. 17.182)	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 2200' FWL X 2373' FSL Sec. 15, T-24-S, R-37-E, NMPM (Unit K, NE/4, SW/4)	8. Well Name and No. So. Mattix Unit Federal #40
	9. API Well No. 30-025-31475
	10. Field and Pool, or Exploratory Area Fowler (Upper Yeso)
	11. County or Parish, State Lea, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other Spud & set casing
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

Well spud 12/17/91
Drilled to 1041'. Ran 24 joints of 8-5/8", 32#, K-55 LT&C casing. Set csg at 1041'. Pumped 850 sx class "C" cmt & 2% CACL. Displaced cmt w/61 bbls water. Circulated 61 bbls cmt to pit. WOC 21 hrs.
TD at 5650'. Ran 5.5", 15.5# K-55 LT&C casing. Cemented w/750 sx Class "C", 16% gel, 2% salt, 0.3% D-13, & 300 sx Class "C". Circulated 31 sx to pit.
Rig released 12/29/91

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

Signed Kenn A. Colvin Title Asst. Admin. Analyst Date 1/8/92

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side