

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

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE 1980 FSL X 660 FWL, Sec 27, (Unit L,
AT TOP PROD. INTERVAL: NW¼, SW¼)
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 X	

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 90 day extension of drilling permit.

5. LEASE
LC-029392-b

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Greenwood Pregrayburg Unit Federal

9. WELL NO.
10

10. FIELD OR WILDCAT NAME
Hud. Shugart-Silurain-Devonian

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
27-18-31

12. COUNTY OR PARISH
Eddy

13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3614.3 GL

RECEIVED
(NOTE: Report results of multiple completion or zone change on Form 9-331)
NOV 14 1978
O. C. C.
ARTESIA, OFFICE

RECEIVED
NOV 13 1978
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

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

SIGNED Vernis Evans TITLE Assist. Admin. Analyst DATE 11-9-78

(Orig. Sgd.) ALBERT R. STALL (This space for Federal or State Office Use)
APPROVED BY _____ TITLE _____ DATE NOV 19 1978
CONDITIONS OF APPROVAL, IF ANY:

0+4-USGS-A
1-Houston
1-SUSP
1-DE