

N. M. O. C. C. COPY  
UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Copy 85F  
Form approved,  
Budget Bureau No. 42 R1424.

5. LEASE DESIGNATION AND SERIAL NO. NM-0338758

6. IF INDIAN, ALLOTTEE OR TRIBE NAME \_\_\_\_\_

7. UNIT AGREEMENT NAME  
BUBBLING SPRINGS UNIT FEDERAL

8. FARM OR LEASE NAME \_\_\_\_\_

9. WELL NO. 1

10. FIELD AND POOL, OR WILDCAT  
WILDCAT

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
26-20-26 NMPM

12. COUNTY OR PARISH EDDY 13. STATE NM

**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  GAS WELL  OTHER DRILLING

2. NAME OF OPERATOR Amoco Production Company RECEIVED

3. ADDRESS OF OPERATOR BOX 68, HOBBS, N. M. 88240 DEC - 3 1973

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 FWL Sec. 26 (UNIT F, SE 1/4 NW 1/4) D. G. C. OFFICE

14. PERMIT NO. \_\_\_\_\_ 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3280' R. D. B.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) _____	(Other) _____

(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.)\*

*On 11/25/73, 8 5/8" OD 24-32# H-55 Casing was set @ 2835' w/ a total of 1195 sq cement. Circ. 10" (Used 800 5x three float shoe + 395 5x in 8 stages thru 1" pipe behind casing) After MOC 18 hours tested casing w/ 1000 psi for 30 min. Test O.K.  
Reduced hole to 7 7/8" @ 2835 and resumed drilling.*

**RECEIVED**  
NOV 30 1973  
U. S. GEOLOGICAL SURVEY  
ARTESIA, NEW MEXICO

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

SIGNED [Signature] TITLE ADMINISTRATIVE ASSISTANT DATE NOV 29 1973

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL: \_\_\_\_\_

04- USGS- ABR A  
1- Div  
1- SUSP  
1- RRV  
2- Cities Service  
1- Gruff

NOV 30 1973  
L. L. BEEKMAN  
ACTING DISTRICT ENGINEER

\*See Instructions on Reverse Side