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c/sf

Form 9-331
Dec. 1973U.S. COMMISSION
Artesia, NM 88210

OCT 27 1982

Form Approved.
Bulger Bureau No. 42-R1424UNITED 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
P. O. Box 68, Hobbs, New Mexico 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL X 1980' FEL, Sec. 22
AT TOP PROD. INTERVAL: (Unit J, NW/4, SE/4)
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 ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☒REPAIR WELL ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐CHANGE ZONES ☐ABANDON* ☐(other) ☐

5. LEASE
NM-16131
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Federal DB
9. WELL NO.
1
10. FIELD OR WILDCAT NAME
Und. Wolfcamp
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
22-25-31
12. COUNTY OR PARISH
Eddy
13. STATE
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3348' GL

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(NOTE: Report results of multiple completion of zone change on Form 9-330.)

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MINERALS MGMT. SERVICE

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give starting 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.)*

Propose to attempt to complete the well in the Wolfcamp horizon per the following:

Run in hole with bit and clean out hole to 14730'. Displace hole with brine water. Run cement bond log. Set packer at 11500'. Perforate interval 13042'-100' with 4 JSPF. Flow test well. If well will not flow acidize with 6000 gallons 15% NEFE-HCL and flush to perms with 51 barrels of brine water. Flow and swab test well.

0+6-MMS,R 1-HOU 1-W. Stafford, HOU 1-DMF

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

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

SIGNED Mark L. Glass TITLE Ast. Adm. Analyst DATE 10-21-82

ACCEPTED FOR RECORD

(ORIG. SGD.) DAVID R. GLASS

APPROVED BY
CONDITIONS OF APPROVAL

OCT 26 1982

U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side