

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
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' FWL, Sec. 11
AT TOP PROD. INTERVAL: (Unit K, NW/4, SW/4)
AT TOTAL DEPTH:

5. LEASE
NM-40452

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Federal "BS"

9. WELL NO.
1

10. FIELD OR WILDCAT NAME
Wildcat Delaware

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
11-18-32

12. COUNTY OR PARISH | 13. STATE
Lea | NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3841.8' GL

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 checked="" type="checkbox"/>
ABANDON* (other)	<input type="checkbox"/>		<input type="checkbox"/>

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

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.)*

Moved in service unit 8-17-82. Pulled tubing and anchor. Ran CIBP and set at 6,700'. Tested to 500 PSI. Tested O.K. Capped with 35' of cement. Perforated intervals 5016'-22', 5024'-28, 5063'-65', 5069'-71', 5076'-80' and 5084'-94' with 2 JSPF. Ran 3 joints 2-3/8" tailpipe, packer, and seating nipple. Packer set at 4784'. Tailpipe landed at 4883'. Swab tested 8 hours. Recovered 29 barrels of load water. Acidized with 4200 gallons 15% NE HCL and flushed with 26 barrels 2% KCL water. Swab tested 24 hours. Recovered 50 barrels of load water and 48 barrels of new water. Pull packer, tubing, seating nipple, and tailpipe. Ran in hole with 4 joints tailpipe, seating nipple, and tubing anchor. Tubing anchor set at 5012' and seating nipple landed at 5135'. Ran pump and 3/4" rods. Tested pump to 500 PSI. Tested O.K. Pump tested 12 days. Recovered 1624 barrels of water. Currently SI evaluating

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

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

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

SIGNED Mark Trueman TITLE Ast. Adm. Analyst DATE 9-28-82

ACCEPTED FOR RECORD (This space for Federal or State office use)

APPROVED BY PETER W. CHESTER TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:
SEP 29 1983