

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. LC-031736 A
2. NAME OF OPERATOR Amoco Production Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 68 Hobbs, NM 88240		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FSL x 1980' FWL (Unit K NE/4, SW/4)		8. FARM OR LEASE NAME Gillully A Federal R /A
14. PERMIT NO.		9. WELL NO. 6
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3541' DF		10. FIELD AND POOL, OR WILDCAT Eunice-Monument GSA
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 25-20-36
		12. COUNTY OR PARISH Lea
		13. STATE NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input checked="" type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

(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 and 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.)*

Move in service unit. Pull rods, pump, tubing, tubing anchor, and tailpipe. Kill well with fresh water. Run in hole with sinker bar to TD (+3854). If fill is encountered at 3845' or higher, rig up Bull Dog Bailer and clean out fill to TD. Log open hole and cased hole from TD to 1800'. Run gamma ray-compensated neutron log with casing collar log. Run in hole with 3 jts tailpipe with API seating nipple one joint off bottom, packer, and tubing. Set packer at 3650'. Pressure up backside to 500 psi for 15 min. If test is OK acidize with 4000 gal 15% HCl. Flush with 26 bbl fresh water. Swab acid load back. Release packer, pull tubing and packer. Perforate Grayburg from apx 3600-3750 (Gross) w/2 JSPF. Run in hole with retrievable bridge plug, retrieving head, packer, and tubing. Set retrievable bridge plug at +3730' and set packer at 3500'. Treat perfs with 4000 gals 15% HCL. Flush with 24 bbl fresh water. Swab and recover load. Release packer. Patch onto retrievable bridge plug and pull tubing, packer and retrievable bridge plug. Run tubing (w/API seating nipple on bottom). Land tubing at 3820' run rods and pump. Return well to production.

0+5 BLM, Roswell 1- NMOC, H 1-J. R. Barnett, Hou Rm 21.156 1-F. J. Nash, Hou Rm 4.206 1-GCC

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

SIGNED Harry C. Clark

TITLE Assist. Admin. Analyst

DATE 3/27/84

(This space for Federal or State office use)

APPROVED BY L. Mark Hollis

TITLE Acting

DATE 8-31-84

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side