

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 PXA

2. NAME OF OPERATOR
Amoco Production Company

3. ADDRESS OF OPERATOR
P.O. Box 68, Hobbs NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
*1980' FSL x 660' FEL
(Unit I, NE/4SE/4)*

5. LEASE DESIGNATION AND SERIAL NO.
LC-032450-(a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Myers A' Federal

9. WELL NO.
#7

10. FIELD AND POOL, OR WILDCAT
Langlee Matrix Queen

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
22-24-37

12. COUNTY OR PARISH
Lea

13. STATE
NM

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3245' GR

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 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 checked="" 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 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.)*

RIH and set CIBP at 3150'. Spotted 5 x 5 class C' neat 3150' to 3101'. Pumped 16 bbls 10# brine gel from 3100'-2450'. Pumped 25 x 5/8 class C' neat from 2450'-2209'. Pumped 41 bbls 10# brine from 2209'-525'. Pumped 55 x 5/8 class C' neat from 525' to surface. Installed PXA marker and MOSU.

0+5 BLM,C 1-J.R. Barnett, Hon 1-F.J. Nash, Hon 1-GCC

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

SIGNED *Henry C. Clark* TITLE *Asst. Admin. Analyst* DATE *1-10-85*

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE *8-13-85*

CONDITIONS OF APPROVAL, IF ANY: _____

*See Instructions on Reverse Side