

Form 9-331
Dec. 1973

NM OIL CONS. COMMISSION
Drawer DD
Artesia, NM 88210

Form Approved.
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

CLSF
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, NM 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 2080' FNL X 760' FEL, Unit H
AT TOP PROD. INTERVAL: Sec. 33, T-17-S, R-27-E
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☒
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

- ☐
☐
☐
☐
☐
☐
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☐
☐
☐

RECEIVED
DEC 31 1981

OIL & GAS
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

5. LEASE
NM-056122
6. IF INDIAN, ALLOTTEE OR TRIBE **RECEIVED**
7. UNIT AGREEMENT NAME
JAN 6 1982
8. FARM OR LEASE NAME
Federal Z Com. O. C. D.
9. WELL NO.
1 ARTESIA, OFFICE
10. FIELD OR WILDCAT NAME
Und. Logan Draw Morrow
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
33-17-27
12. COUNTY OR PARISH
Eddy
13. STATE
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3554' GL

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.)*

Propose to fish perforating gun from bottom of hole, then acidize well to increase production. Fish perforating gun with wireline through 2-3/8" tubing. Acidize with 4000 gal. of 15% HCL NEFE acid and 180,000 scf of nitrogen. Pump at 6 BPM as follows: (a) Pump 4000 gal. of 15% HCL acid and 130,000 scf of nitrogen; (b) Flush with 36 bbl. of 2% KCL water and 50000 scf of nitrogen; and (c) Flow back to recover load. Return well to production. (Verbal approval by Peter Chester 12-29-81.)

0+4-USGS, R 1-Hou 1-Susp 1-CLF

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED Cathy L. Lorman TITLE Ast. Adm. Analyst DATE 12-30-81

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

Set @ _____ Ft.

APPROVED

JAN 5 1982
JAMES A. GILLHAM
DISTRICT SUPERVISOR