

RECEIVED
MAY 24 1972

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN THE MANNER INDICATED
(Other instructions on reverse side)

5. LEASE DESIGNATION AND SERIAL NO.

NM-0557371

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

MAICO "F" Federal

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

EMPIRE A-2

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

1-18-27 NMPM

12. COUNTY OR PARISH 13. STATE

EDDY NM

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.
See APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☒ WATER WELL ☐ OTHER ☐

2. NAME OF OPERATOR
Amoco Production Company

3. ADDRESS OF OPERATOR
BOX 68, HOBBS, N. M. 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' FWL Sec 1 (Unit L, NW 1/4 SW 1/4)

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3581' R.D.B.

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

NOTICE OF INTENTION TO:

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

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOTING OR ACIDIZING ☒	ABANDONMENT* ☐
(Other) ☐	

(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.)*

Perforations 6040-80' were acidized w/ 2500 gal 15% HF acid. Evaluated & restored to prod.

Prior - Flow 102 BO + 0 BW 24 hrs. GOR 96/
after - Flow 152 BO + 0 " " " GOR 691

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U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED _____ TITLE AREA SUPERINTENDENT DATE MAY 17 1972

(This space for Federal or State office use)

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

0+4- USGS-A2A
1-DIV
1-SUSP
1-HONDU
MAY 23 1972
H. L. BECKMAN
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side