

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN T
(Other instruc. on re-
verse side)Form approved.
Budget Bureau No. 42-R1424

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"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Amoco Production Company	8. FARM OR LEASE NAME MALCO FEDERAL
3. ADDRESS OF OPERATOR BOX 68, HOBBS, N. M. 88240	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 330' FNL x 330' FWL Sec. 15 (UNIT D, NW 1/4 NW 1/4)	10. FIELD AND POOL, OR WILDCAT EMPIRE ABO
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 15-18-27 NMPM
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3447' R.D.B.	12. COUNTY OR PARISH EDDY
	13. STATE N.M.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <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, 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.)*

In accordance w/ Form 9-331 submitted 3-9-72, intervals 5941-48, 64-72 was perforated w/ 2JS PF and acidized w/ 6000 gal 24% NE acid. Evaluated and restored to production.

Prior - pmp 12 BD + 17 BW 24 hrs.
after - pmp 17 BD + 89 BW 24 hrs.

TD- 9855'
PBD- 6050'
5 1/2" CSA 9855

OC - 3-13-72
COMP - 3-28-72

RECEIVED
MAR 30 1972
U. S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

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

SIGNED

TITLE

AREA SUPERINTENDENT

DATE

MAR 28 1972

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

0 + 4 USGS
1- Dir
1- Sup
1- Hando

MAR 30 1972
R. L. BECKMAN
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side