

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPI
(Other instructions
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"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Amoco Production Company		8. FARM OR LEASE NAME PMS 8 Federal	
3. ADDRESS OF OPERATOR P. O. Box 3092, Houston, TX 77253		9. WELL NO. 7	
4. LOCATION OF WELL Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660 FNL X 1980 FEL		10. FIELD AND POOL, OR WILDCAT Shugart Bone Springs, North	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 8, T-18-S, R31E, NMPM	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3702.0		12. COUNTY OR PARISH Eddy	
		13. STATE NM	

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 type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Spud Date & Set Casing <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.)*

Well spud 7/31/91.

Drilled 17-1/2" hole X TD @ 424'. Ran 12 joints 13-3/8", 54.50 PPF, K-55 Buttress csg X landed @ 424'. Pumped 15 BFW ahead X mixed X pumped 500 sx class C cmt w/2% CALC2 X 1/4 PPS X Cello-flake X 14.8 PPG slurry wt X dropped plug X displaced w/60 BFW. Circulated 31 bbl slurry to pit. Drilled cmt X plug X inserted float valve X 35' hard cmt X cleaned out to 418'.

Drilled 12-1/4" hole & TD csg @ 2166'. Ran 51 joints 8-5/8" 32#, K-55, LT&C csg X landed @ 2166'. Pumped 15 BFW ahead X mixed & pumped 1050 sx "C" 35:65:2+2% CAL CHL + 12.5 lb/sx salt lead slurry @ 13.8 ppg X followed w/200 sx "C" + 2% CAL CHL + tail slurry @ 14.8 ppg X dropped plug X displaced w/126 BFW. Circulated 61 Bbls slurry to pit. Drilled or washed out soft cmt 2009'-2078'. Drilled plug X float collar X 86' firm to hard cmt.

RECEIVED
AUG 5 10 45 AM '91

I hereby certify that the foregoing is true and correct

SIGNED <u>[Signature]</u>	TITLE <u>Asst. Admin. Analyst</u>	DATE <u>8/5/91</u>
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(This space for Federal or State office use)

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

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*See Instructions on Reverse Side