

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
NM OIL AND GAS COMMISSION
Artesia, NM 88210
SUBMIT IN TRIP!
(Other instructions
ver 88210

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		RECEIVED BY NOV 24 1986 O. C. D. ARTESIA OFFICE	5. LEASE DESIGNATION AND SERIAL NO. LC-029392(a)	
2. NAME OF OPERATOR Amoco Production Company			6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 68 Hobbs, NM 88240			7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980 FNL x 1980 FEL Unit G (SW/4 SW/4)			8. FARM OR LEASE NAME Greenwood Unit Federal	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3632' GL 3049 DF		9. WELL NO. 2
				10. FIELD AND POOL, OR WILDCAT Wildcat Bone Springs
				11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 34, 18, 31
		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 checked="" type="checkbox"/>	SHOOTING OR ACIDIZING <input 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.) *

Propose to permanently plug and abandon the subject well.

MIRU-SU. Pull tubing. RIH w/CIBP set at 8000'. Cap w/35' cement. Pull up and spot above cement, 55.5 bbls of 10# brine with 25# gel/bbl. Spot a 32 sack class H cement plug across the interval 6318'6471. (10-3/4 casing shoe at 6394'). Pull up and spot above cement plug, 32.5 bbls of 10# brine w/25# gel/bbl. Spot a 32 sack class H cement plug across the interval 5318-5471. Top cement calc. at 5394'. Pull up and spot above cement plug, 71 bbls of 10# brine w/25# gel/bbl. RIH w/4" casing gun and perforate 3447-48' w/4 SPF. Top of Queen at 3397'. Install flange on wellhead. Open 7-10-3/4" bradenhead. Establish circulation and pump 1833 sacks class H cement. close bradenhead when cement circulates. Cap well and erect abandonment marker. RDMO-SU.

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

SIGNED Steve Brownlee

TITLE Admin. Analyst

DATE 10-30-86

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE 11-20-86

*See Instructions on Reverse Side

