NH OIL CON COMMISSION Drawor DD Artesia, NM 88210

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Form 9–331 Dec. 1973	Form Approved.
UNITED STATES	Budget Bureau No. 42-R1424 5. LEASE
DEPARTMENT OF THE INTERIOR	LC-029392-b
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
eservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME
1. oil gas X other NAR 1 5 1983	Greenwood Pre-Grayburg Unit Fee
2. NAME OF OPERATOR	9. WELL NO. 1
Amoco Production Company ARTESIA, OFFICE	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Shugart Morrow
P. O. Box 68, Hobbs, New Mexico 88240	11. SEC., T., R., M., OR BLK. AND SURVEY OF
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	AREA 27-18-31
AT SURFACE: 1980' FSL X 660' FWL, Sec. 27	12. COUNTY OR PARISH 13. STATE
at top prod. interval: (Unit L, NW/4, SW/4) at total depth:	Eddy NM
	14. API NO.
L6. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	
·	15. ELEVATIONS (SHOW DF, KDB, AND WD 3614.3 GL
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
FRACTURE TREAT	MAARDON
SHOOT OR ACIDIZE	WE GELVISIN
	(NOTE) Report results of multiple concretion or zon
PULL OR ALTER CASING L  MULTIPLE COMPLETE	change on Form 9-330.)
	MAR 1 0 1983
ABANDON*	
	OHL & GAS MIMERALS MGMT. SERVICE
<ol> <li>DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stating including estimated date of starting any proposed work. If well is of</li> </ol>	te all pertinent date and give pertinent date
measured and true vertical depths for all markers and zones pertine	nt to this work.)*
Propose to place well on production in Morrow	as follows:
Kill well with 2% KCL brine water. Release pa in hole with tubing and pull retrievable bridg in hole with 1 joint of 2-3/8" tailpipe, 1.875 tubing, packer, and 2-3/8" tubing to surface. Morrow intervals on production. Request permi shut-in above packer.	e plug. Pull out of hole. Run profile nipple, 2 joints 2-3/8" Set packer at 11390'. Place ssion to leave Atoka interval
0+6-BLM, R 1-HOU 1-DMF 1-W. Stafford, HC	U
Subsurface Safety Valve: Manu. and Type	Set @ I
18. I hereby certify that the foregoing is true and correct	
signed Minh Treama Ast. Adm. Ar	alvst
APPROVED In Federal or State o	
APPROVED BY TITLE TITLE	DATE
MAR 1 4 1983	
FOR	
JAMES A. GILLHAM DISTRICT SUPERVISOR Instructions on Reverse	s:Le
DISTRICT SUPERVISOR	