

N O.C.C. COPY
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYForm 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 Form 9-331-C for such proposals.)

1. oil ☐ gas ☒ other ☐
well well2. NAME OF OPERATOR
Amoco Production Company ✓3. ADDRESS OF OPERATOR
P.O. Drawer "A", Levelland, TX 79336

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1650' FNL & 1980' FWL, Sec 35
AT TOP PROD. INTERVAL: (Unit F. SE $\frac{1}{4}$, NW $\frac{1}{4}$)
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

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

SUBSEQUENT REPORT OF:

☒
☐
☐
☐
☐
☐
☐
☐RECEIVED
MAR 9 1979
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO5. LEASE
LC-029392 (a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Greenwood PreGrayburg Unit Federal9. WELL NO.
1210. FIELD OR WILDCAT NAME
Shugart Silurian-Devonian11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
35-18-3112. COUNTY OR PARISH
Eddy13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
263 RDB

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.)*

On 2/21/79 Landis Drilling Co. (Rig #2) spudded a 17 1/2" hole at 2:30 p.m. Drilled to a TD of 765' and set 13 3/8" 48# H-40 ST & C casing at 765'. Cemented with 800 sx Incor cement with 2% CACL. Circulated 275 sx. Plugged down 11:00 p.m. 2/23/79. WOC 18 hours. Tested casing with 800# for 30 minutes. Tested O.K. Reduced hole to 12 1/4" and resumed drilling.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Ray Cox TITLE Admin. Supervisor DATE March 7, 1979

(This space for Federal or State office use)

APPROVED BY Joe J. Lara TITLE ACTING DISTRICT ENGINEER

CONDITIONS OF APPROVAL, IF ANY:

0+4-USGS, A
1-Houston
1-RWA
1-Susp

*See Instructions on Reverse Side