

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.)

AUG 16 1984

O. C. D.

ARTESIA OFFICE

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

AMOCO PRODUCTION COMPANY ✓

3. ADDRESS OF OPERATOR

P. O. Box 68, Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1650' FNL X 1980' FWL, Section 35
(Unit F, SE/4 NW/4)

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3637.9' GL

5. LEASE DESIGNATION AND SERIAL NO.

LC-029392- (a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME Greenwood
PreGrayburg Unit Fed "A" Com

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Shugart Penn Morrow

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

35-18-31

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:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other) install plunger lift

(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.)*

MISU 7-19-84. Killed well and pulled tubing. Ran sand and tubing, landed at 11656'.
MOSU 7-20-84. MISU 7-21-84 and began swab testing. MOSU 7-26-84. Placed plunger
in well. Returned well to production.

0+6-BLM, C 1-J. R. Barnett, HOU 21.156 1-F. J. Nash, HOU Rm. 4.206 1-BFC

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

SIGNED

Bonita Cole

TITLE Administrative Analyst

DATE 8-9-84

ACCEPTED FOR RECORD

(This space for Federal or State office use)

APPROVED BY

LWP

TITLE

DATE

CONDITIONS OF APPROVAL AUG 14 1984

Carlsbad

NEW MEXICO *See Instructions on Reverse Side