

Form 9-331
Dec. 1973Form Approved.
Budget Bureau No. 42-R1424UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 ☒ well other

SEP 20 1979

2. NAME OF OPERATOR
Amoco Production CompanyO. C. C.
ARTESIA, OFFICE3. ADDRESS OF OPERATOR
P. O. Box 68, Hobbs, NM 882404. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
660' FSL & 2310' FWL, Sec. 35
AT SURFACE: (Unit N, SE/4 SW/4)
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

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

5. LEASE

LC-029392-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Greenwood PreGrayburg Unit Fed. Com.

9. WELL NO.

13

10. FIELD OR WILDCAT NAME

Und. Shugart Penn

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

35-18-31

12. COUNTY OR PARISH

Eddy

13. STATE

NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3627.8 GR

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

Named changed to include Com.

Drilled to a TD of 4800' and ran 9-5/8" casing set at 4800'. Cemented with 1800 SX Howcolite with additives and 200 SX Class C Cement. Plug down 3:00 p.m. 8-12-79. Circulated 110 SX. WOC 72 hrs. Tested casing with 1000# for 30 min. OK. Reduced hole to 8-1/2" and resumed drilling.

Subsurface Safety Valve: Manu. and Type

Set @

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

SIGNED

Ray Cox

TITLE

Admin. Supervisor

DATE

9-13-79

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

0+4-USGS,A 1-Hou 1-Susp 1-BD 1-Cities SVC. 1-Conoco