5. LEASE

新诺克(龙扇)

UNITED STATES

DEPARTMENT OF THE INTERIOR	NM-13621	
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
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.)	7. UNIT AGREEMENT NAME RECEIVE	
	8. FARM OR LEASE NAME	
1. oil gas X other	Federal BW	
2. NAME OF OPERATOR	9. WELL NO.	
Amoco Production Company	10. DELD OR WILDCAT NAME	
3. ADDRESS OF OPERATOR	10. Neld or Wildcat Name WSeigrest Draw Morrow	
P. O. Box 68 Hobbs, NM 88240	11. SEC., T., R., M., OR BLK. AND SURVEY OR	
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA	
below.)	ub-29-19-24	
AT SURFACE: 1980' FNL & 1980' FWL, Sec. 29	12. COUNTY OR PARISH 13. STATE	
AT TOP PROD. INTERVAL: (Unit F, SE/4, NW/4) AT TOTAL DEPTH:	Eddy NM	
	14. API NO.	
 CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 		
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)	
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	3818.5' GL	
TEST WATER SHUT OFF		
FRACTURE TREAT		
SHOOT OR ACIDIZE REPAIR WELL		
PULL OR ALTER CASING	(NOTE: Report results of multiple completion or zone	
MULTIPLE COMPLETE	(change on Form 9–330.)	
CHANGE ZONES		
ABANDON*		
(other)		
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stem including estimated date of starting any proposed work. If well is a measured and true vertical depths for all markers and zones pertined.	in to this work.)*	
Drilled to a TD of 2025' and ran 9-5/8" 36# K-Cemented with 2450 SX Dowell RFC cement with a 1-11-81. Cement did not circulate. Ran temper 195'. Cement down 1" annulus with 75 SX Class 2 SX. WOC 18 hours. Tested casing with 1000	additives. Plugged down at 8:40 p.m. erature survey. Top of cement approx s C cement with additives. Circulate	
0+5-USGS, A 1-Hou 1-Susp 1-	-GLF 1-W. Stafford Hou	
	Innaion ac	
Subsurface Safety Valve: Manu. and Type		
18. I hereby certify that the foregoing is true and correct	\OIL CO(\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	La Contraction of the Contractio	
SIGNED / Serald & Tokel TITLE Admin. Analy	/St DATE 1-23-81	
(This space for Federal or State off	ice use)	
PETER W. CHECKER		
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANX: 10 1000	DATE	
cf. 8 & 1 1901		
100000000000000000000000000000000000000		
*See Instructions on Reverse S	Side	