

UNITED 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 well ☐ gas well ☒ other ☐

2. NAME OF OPERATOR

Anadarko Production Company

3. ADDRESS OF OPERATOR

P. O. Box 67, Loco Hills, New Mexico 88255

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

AT SURFACE: 1910' FSL & 2250' FEL Sec. 20, T19S, R31E

AT TOP PROD. INTERVAL: Same Eddy County, New Mex.

AT TOTAL DEPTH: Same

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

SEP 17 1981

OIL & GAS
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

X Abandon Morrow; complete in Atoka

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.)*

13. Perforated Atoka 11,518' - 46' KB using 3-3/8" cased gun w/4" charges @ 2 SPF (total holes = 56 w/1/2" diam).

14. Hydrotested in hole with packer.

15. Removed BOP & installed X-tree.

16. Set 4 1/2" Baker Lok-set packer @ 11,482' KB with ON/OFF tool @ 11,480' KB & vent assembly directly below packer & blanking plug in place.

17. Flowed & tested well (1/2" orifice @ 12.5 oz FTP = 7 MCFGPD).

18. Acidized Atoka perfs 11,518' - 46' KB with 5000 gals 7 1/2% MSR-100 & 73 BS + 1000 SCF N₂/bbl. AR&P = 6.2 BPM @ 6450#. ISDP = 4900#.

19. Swa bbed & tested (Atoka)

Note: Well tested (31 MCFGPD with 1/2" orifice @ 15 oz FTP) after swabbing dry.

20. Plan to P & A Atoka and complete in Bone Springs.

5. LEASE

NM - 0557729

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal Hanson Com.

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Undesignated

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

20 - 19S - 31E

12. COUNTY OR PARISH 13. STATE

Eddy

New Mexico

14. API NO.

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

3452.0 GL

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

Subsurface Safety Valve: Manu. and Type

Set @

Ft.

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

SIGNED

James A. Gulliam

TITLE Area Supervisor

DATE

September 16, 1981

SEP 18 1981

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL IF ANY

JAMES A. GULLIAM
DISTRICT SUPERVISOR