

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRI-  
(Other instructions  
verse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

45F

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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	<b>RECEIVED BY</b> <b>FEB -4 1987</b> <b>O. C. D.</b> <b>ARTESIA OFFICE</b>	5. LEASE DESIGNATION AND SERIAL NO. NM-059077
2. NAME OF OPERATOR AMOCO PRODUCTION COMPANY ✓		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 68, Hobbs, NM 88240		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with an State map, if available.) See also space 17 below.) At surface 1650' FNL x 1650' FWL (Unit F, SE/4, NW/4)		8. FARM OR LEASE NAME HOC Federal
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4054' RDB	9. WELL NO. 1
		10. FIELD AND POOL, OR WILDCAT Indian Basin-Penn Gas
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 13-22-23
		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)

Commingling of gas well gas X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other)

(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.)\*

Propose to connect the HOC Federal #1, Smith Federal #1, and the Smith Federal Gas Com #1 into a common sales line to Marathon. (See Sundry Notice for the HOC Federal #1, Smith Federal #1 and the Smith Federal Gas Com #1) Each well will have an allocation meter upstream of the sales meter. (See attached sketch)

We respectfully request approval of these proposed gas meter installation.

I hereby certify that the foregoing is true and correct

SIGNED S. Brownlee

TITLE Administrative Analyst

DATE 1-27-87

(This space for Federal or State office use)

APPROVED Orig: Sgd. C. J. Brownlee

TITLE

DATE 2-3-87

CONDITIONS OF APPROVAL

\*See Instructions on Reverse Side