|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ` <del></del>                                                        | M. O. C. C. CIPY_                                          | NM 0476 36                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|
| Form 9-331<br>(May 1963)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | UN ID STATES<br>PARTMENT OF THE INTE                                 | SUBMIT IN TRIP. (Other instructions J                      | TEO Form approved. Budget Bureau No. 42-Rd  5. LEAST DESIGNATION AND SERIAL N                                       |
| CHAIDDY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | NOTICES AND REPORTS                                                  | · · · · · · · · · · · · · · · · · · ·                      | 6. IF INDIAN, ALLOTTEE OR TRIBE NA                                                                                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | r proposals to drill or to deepen or player of the Permit—" for such | ug back to a different reservoir.                          | - n                                                                                                                 |
| 1.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                      | ECEIVI                                                     | 7. UNIT AGREEMENT NAME                                                                                              |
| O NAME OF OPERATOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | THER                                                                 | ΔIIG 9 1974                                                | 8. FARM OR LEASE NAME                                                                                               |
| Amoco Production Company                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                      | AUG 9 1974                                                 | HEEREN FED GAS CO                                                                                                   |
| BOX 367, ANDREWS, TEXAS 79714                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                      | O. C. C.                                                   | 9. WELL NO.                                                                                                         |
| 4. LOCATION OF WELL (Report location clearly and in accordance See also space 17 below.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                      | ARTESIÁ, OFFIC<br>any State requirements.*                 | 10. FIELD AND POOL, OR WILDCAT                                                                                      |
| At surface                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 3 500 C 2/4 1                                                        | V AIEL QUIL                                                | BLACK RIVER-WOLFCAM                                                                                                 |
| 1980 FSL x 198                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | o FWL Sec. 7 (Unit                                                   | K, INEIA SWIA)                                             | SURVEY OR AREA                                                                                                      |
| 14. PERMIT NO.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 15. ELEVATIONS (Show whether                                         | er DF, RT, GR, etc.)                                       | 12. COUNTY OR PARISH 13. STATE                                                                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 3246                                                                 | R.D.B.                                                     | EDDY N.I                                                                                                            |
| 16. Che                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | eck Appropriate Box To Indicat                                       | e Nature of Notice, Report,                                | or Other Data                                                                                                       |
| NOTICE (                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | of intention to:                                                     | st                                                         | BERQUENT REPORT OF:                                                                                                 |
| TEST WATER SHUT-OFF FRACTURE TREAT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | PULL OR ALTER CASING MULTIPLE COMPLETE                               | WATER SHUT-OFF<br>FRACTURE TREATMENT                       | REPAIRING WELL ALTERING CABING                                                                                      |
| SHOOT OR ACIDIZE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ABANDON®                                                             | SHOOTING OR ACIDIZING                                      | ABANDONMENT <sup>®</sup>                                                                                            |
| REPAIR WELL (Other)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | CHANGE PLANS                                                         | (Other) (Note: Report r                                    | esults of multiple completion on Well completion Report and Log form.)                                              |
| nent to this work.) *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                      | ,                                                          | reprinting of                                                                                                       |
| This well so<br>the 60 day                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | hut-in 6.30.<br>y emergency                                          | 74 due to e<br>pale to Ira                                 | rpiration of<br>mswestern.                                                                                          |
| This well so day                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | hut-in 6.30.<br>y emergency<br>in in this st                         | 74 due to e<br>pale to Ira<br>atus pendi                   | upiration of ms western.                                                                                            |
| This well so day                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | hut-in 6.30.<br>y emergency<br>in in this st                         | 74 due to e<br>pale to Ira<br>atus pendi                   | rpiration of<br>mswestern.                                                                                          |
| This well so day                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | hut-in 6.30.<br>y emergency<br>in in this st                         | 74 due to e<br>pale to Ira<br>atus pendi                   | upiration of ms western.                                                                                            |
| This well so day                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | hut-in 6.30.<br>y emergency<br>in in this st                         | 14 due to e<br>pale to Ira<br>atus pendi<br>. (110m 3 to   | upication of ms western.  Ing permanent 6 months hopeful                                                            |
| This well so day                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | hut-in 6.30.<br>y emergency<br>in in this st                         | 14 due to e<br>pale to Ira<br>atus pendi<br>. (110m 3 to   | upiration of ms western.                                                                                            |
| This well so day                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | hut-in 6.30.<br>y emergency<br>in in this st                         | oale to Ira<br>atus pendi<br>1. (Irom 3 to                 | upitation of movestern.  Ing permanent to months hopeful                                                            |
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| This well so day                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | hut-in 6.30.<br>y emergency<br>in in this st                         | 74 due to e<br>pale to Ind<br>latus pendi<br>l. (110m 3 to | upitation of movestern.  Ing permanent to months hopeful                                                            |
| This well so day                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | hut-in 6.30.<br>y emergency<br>in in this st                         | 74 due to e<br>pale to Ind<br>latus pendi<br>l. (110m 3 to | apiation of monwestern.  Ing permanent 6 months hopeful  100-21974                                                  |
| This well state 60 days will remain marketing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | hut-in 6.30.  y emergency  no in this st  arrangements               | oale to Indicatus pendir. (Irom 3 to                       | apiation of monwestern.  Ing permanent 6 months hopeful 1974  EGEGGEAL SURVEY SIA, NEW MEXICO                       |
| This well state 60 days will remain marketing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | hut-in 6.30.  y emergency  no in this st  arrangements               | 74 due to e<br>pale to Ind<br>latus pendi<br>l. (110m 3 to | apiation of monwestern.  Ing permanent 6 months hopeful 1974  EGEGGEAL SURVEY SIA, NEW MEXICO                       |
| This well state 60 days will remain marketing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | egoing is true and correct                                           | oale to Indicatus pendir. (Irom 3 to                       | apiation of monwestern.  Ing permanent 6 months hopeful 1974  EGEGGEAL SURVEY SIA, NEW MEXICO                       |
| Ihis well so the formal well remains marketing  18. I hereby certify that the formal signed for Federal of States of | egoing is true and correct  Allkun U TITLE                           | atus pendi. (Ism 3 to  ADMINISTRATIVE ASSISTA              | ins western.  Ing permanent 6 months hopeful  ECCIVED  LUC - 21974  ECCICAL SURVEY SIA, NEW MEXICO  DATE JUL 31 197 |
| Ihis well so the for the formark time for signed by Conditions of Approved by Conditions of Condit | egoing is true and correct  Aller office use)                        | atus pendi. (Ism 3 to  ADMINISTRATIVE ASSISTA              | ins western.  Ing permanent 6 months hopeful  ECCIVED  LUC - 21974  ECCICAL SURVEY SIA, NEW MEXICO  DATE JUL 31 197 |
| Ihis well so the formal well remains marketing  18. I hereby certify that the formal signed for Federal of States of | egoing is true and correct  Alkunu title  Title                      | atus pendi. (Ism 3 to  ADMINISTRATIVE ASSISTA              | apiation of monwestern.  Ing permanent 6 months hopeful 1974  EGEGGEAL SURVEY SIA, NEW MEXICO                       |