

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN THE  
(Other Instructions on reverse side)

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

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back or to convert a well to a reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER - Water Injection		5. LEASE DESIGNATION AND SERIAL NO. NM-0413688-A	
2. NAME OF OPERATOR Amoco Production Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME C/SF	
3. ADDRESS OF OPERATOR P. O. Box 68, Hobbs, New Mexico 88240		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980 FNL x 1980 FEL (Unit G, SW/4, NE/4)		8. FARM OR LEASE NAME Old Indian Draw Unit	
14. PERMIT NO. 300152161800		9. WELL NO. 5	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3081' GR		10. FIELD AND POOL, OR WILDCAT Delaware	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 18-22-28	
		12. COUNTY OR PARISH Lea	13. STATE NM

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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.)\*

MIRU - Nowsco Coil Tubing Unit. RIH w/1" Coil Tubing to 3260'. Acidize w/1500 gallons 7-1/2% HCL & additives. Air 1/2 BPM. POH w/1" Coil tubing. RIH w/1" coil tubing to 3300'. Pump 105,000 SCF N<sub>2</sub> & circulate for 2-1/2 hours. POH 1" coil tubing. RDMO - coil unit. Commence injection operations.

IPWO: 236 BWIPD at 400 psi.  
IAWO: 400 BWIPD at 372 psi.

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

SIGNED

TITLE Admin. Analyst

DATE 10-7-86

(This space for Federal or State office use)

Steve Brownlee

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

OCT 16 1986

\*See Instructions on Reverse Side



RECEIVED  
OCT 20 1986  
OCEAN  
HOBBS OFFICE