N.M.O.C.D. COPY

REPAIR WELL

UNITED STATES May 1963) DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY			SUBMIT IN TRIPLICATE (Other instructions on re	Form approved, Budget Bureau No. 42 R1424. 5. LEASE DESIGNATION AND SERIAL NO. NM 32636	
		OTICES AND REPORTS Opensals to drill or to deepen or plug JCATION FOR PERMIT—" for such		G. IF INDIAN, ALLOS	TTEE UR TRIBE NAME
1. OIL GAS WELL WEI	L XX OTHER	7. UNIT AGREEMENT NAME			
2. NAME OF OPERATO	R	8. FARM OR LEASE NAME			
Delta Dril	ling Comp	Amoco Federal			
3. ADDRESS OF OPER		9. WELL NO.			
P. O. Box	3467. Mid	1			
4. LOCATION OF WELL See also space 17 At surface	(Report location	10. FIELD AND POOL, OR WILDCAT			
1980' FSL	& 990' FE	L		11. SEC., T., R., M., C SURVEY OR A	REA
				S-11, T-23S	, R28E
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.)		12. COUNTY OR PAR	ISH 13. STATE
		2992.1		Eddy	New Mexico
16.	Check	Appropriate Box To Indicate	Nature of Notice, Report, or	Other Data	
	NOTICE OF IN	GENT REPORT OF:			
TEST WATER SHI	T-OFF	PULL OR ALTER CASING MULTIPLE COMPLETE	WATER SHUT-OFF FRACTURE TREATMENT	REPAIRIN	
SHOOT OR ACIDIZ	E	ABANDON*	SHOOTING OR ACIDIZING	ABANDON	MENT*

(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.) *

(Other) Test Casing

Drilled 17-1/2" hole to 2636'. Ran 65 Jts 13-3/8 61# K-55 ST&C casing and set at 2624'. Cemented with 2645 sacks Halliburton Lite with 1/4# Flocele and 10# salt per sack and 200 sacks Class "C" with 2% CaCl. Circulated 175 sacks to surface. Plug down 6:00 AM 8/14/79. WOC 46 hrs. Test casing to 1500 psi for 30 min. Held OK. Drill out with 12-1/4 bit at 4:30 AM 8/16/79.

RECEIVED

AUG 20 1979

U.S. GEOLOGICAL SURVEY ARTESIA, NEW MEXICO

18. I hereby certify that the foregoling is true and correct SIGNED TITLE	Field Project Manager	DATE 8/17/79
(This space for Federal or State office use) APPROVED BY LLVY STATEMENT. TITLE	ACTING DISTRICT ENGINEER	AUG 1