

SF/file

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
Amoco Production Company ✓

3. ADDRESS OF OPERATOR
P. O. Box 68 - Hobbs, NM 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1650' FSL X 1980' FEL, Sec. 20
AT TOP PROD. INTERVAL: (Unit J, NW/4, SW/4)
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

5. LEASE
NM-0415 239-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME RECEIVED

8. FARM OR LEASE NAME
Federal AE DEC 5 1980

9. WELL NO.
1 O. C. D.

10. FIELD OR WILDCAT NAME
Und., Morrow ARTESIA OFFICE

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
20-22-28

12. COUNTY OR PARISH
Eddy

13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3077' GR

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:

☐
☐
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RECEIVED
NOV 28 1980
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

E: Report results of multiple completion or zone change on Form 9-330.)

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.)*

Moved in service unit 10-24-80. Killed well and pulled tubing, packer and tailpipe. Set a cast iron bridge plug at 10150'. Capped with 35' cement. Capped with 35' cement. Perforated 9672-9712' and 9514-9580' with 2 JSPF. Acidized with 1600 gal. 15% HCL with additives. Currently swab testing.

0 + 5 - USGS, A 1-Hou 1-Susp 1-LBG 1-W. Stafford, Hou

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Penton Green TITLE Ast. Admin. Analyst DATE 11-26-80

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

