

N.M.O.C.D. COPY

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 ☐ gas ☒ 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' FWL & 1980' FNL, Sec. 3
AT TOP PROD. INTERVAL: (Unit F, SE/4, NW/4)
AT TOTAL DEPTH:

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

| REQUEST FOR APPROVAL TO: | SUBSEQUENT REPORT OF: |
|---|-------------------------------------|
| TEST WATER SHUT-OFF <input type="checkbox"/> | <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | <input type="checkbox"/> |
| MULTIPLE COMPLETE <input type="checkbox"/> | <input type="checkbox"/> |
| CHANGE ZONES <input type="checkbox"/> | <input type="checkbox"/> |
| ABANDON* <input type="checkbox"/> | <input type="checkbox"/> |
| (other) <input type="checkbox"/> | <input type="checkbox"/> |

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 5-19-81. Ran gamma ray log from 12758'-10800'. Perforated 12721'-12728' with 2 JSPF. Acidized with 1000 gal. 7-1/2% HCL with additives. Flow tested with no show of gas. Set a cast iron bridge plug at 12700'. Perforated 12599'-12606', 21656'-12662', 12664'-12666' and 12672'-12676' with 2 JSPF. Acidized with 3000 gal. 7-1/2% HCL with additives. Currently swab testing.

0+4-USGS, A 1-Hou 1-Susp 1-LBG 1-W. Stafford, Hou
1-Union Oil 1-Holly Energy 1-Read X Stevens

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

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

SIGNED Penton Green TITLE Ast. Adm. Analyst DATE 6-5-81

APPROVED BY
CONDITIONS OF

ACCEPTED FOR RECORD
PETER W. CHESTER
JUN 11 1981
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

TITLE

See Instructions on Reverse Side

5. LEASE
NM-16331
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Federal AD Com.
9. WELL NO.
1
10. FIELD OR WILDCAT NAME
Wildcat Morrow
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
3-23-28
12. COUNTY OR PARISH
Eddy
13. STATE
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3012.4 GL

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

RECEIVED
JUN 11 1981
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO