

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 ~~well~~ ^{reservoir} (or a different reservoir. Use Form 9-331-C for such proposals.)

1. oil well ☒ gas well ☐ other ☐ **AUG 6 1980**
2. NAME OF OPERATOR
Amoco Production Company **O. C. D.**
3. ADDRESS OF OPERATOR
ARTESIA, OFFICE
P. O. Box 68 Hobbs, NM 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 2310' FNL & 430 FWL, Sec. 30
AT TOP PROD. INTERVAL: (Unit E, SW 1/4, NW 1/4)
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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:

- ☐
☐
☒
☐
☐
☐
☐
☐

RECEIVED

AUG 1 1980

**U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO**

(NOTE: 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 7-21-80. Perforated 3420'-3470' with 1 JSPF. Ran tubing, packer, and tailpipe. Packer set at 3111'. Tailpipe set at 3361'. Acidized with 1500 gal. 15% HCL acid and 5000 gal. HF-HCL acid. Currently swab testing.

0+4-USGS, A 1-Hou 1-Susp 1-LBG

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

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

SIGNED Bob Law TITLE Admin. Analyst DATE 7-30-80

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

DATE

AUG 4 1980

**U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO**