

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

C/SF

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, New Mexico 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1980' FNL x 1980' FEL, Sec. <sup>35</sup> 25  
AT TOP PROD. INTERVAL: (Unit G, SW/4, NE/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:

☐  
☐  
☐  
☐  
☐  
☐  
☐  
☐

5. LEASE  
NM-14759

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME <sup>RECEIVED</sup>  
APR 30 1982

8. FARM OR LEASE NAME  
Federal CU

9. WELL NO.  
1

10. FIELD OR WILDCAT NAME  
Wildcat Morrow

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
35-25-25

12. COUNTY OR PARISH  
Eddy

13. STATE  
NM

14. API NO.  
30-015-24025

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3560.5

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

APR 9 1982

OIL & GAS

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.)\*

Propose to change cementing program to cement 5-1/2" casing to approximately 8300' or 600' above the Wolfcamp perms. Verbal approval Freeman-Stewart.

ACCEPTED FOR RECORD

APR 29 1982

0+6-USGS, R 1-Hou 1-W. Stafford, Hou 1-DMF 1-Getty  
1-El Paso 1-C & K Petro 1-Desana 1-Gulf

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_

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

SIGNED Mark Freeman TITLE Ast. Adm. Analyst DATE 4-8-82

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: