

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  
501 Airport Drive, Farmington, NM 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 840' FSL x 1800' FWL  
AT TOP PROD. INTERVAL: Same  
AT TOTAL DEPTH: Same

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\* ☐

SUBSEQUENT REPORT OF:

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☐

(other) Repair pump and check for sand fill

RECEIVED

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

JAN 13 1982

U. S. GEOLOGICAL SURVEY  
FARMINGTON, N. M.

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.)\*

Operations commenced on 12-28-81. Total depth of the well is 6312' and the plug back depth is 6268'. Tripped out of hole with rods and pump. Pump was in need of repair. Killed the well using a total of 280 barrels 2% KCL water. Released packer at 6050'. Ran in hole to plug back depth of 6268' to check for sand fill. No sand present. Reset packer at 6050'. Tripped in with pump and rods. Rehung head on pumping unit. Hung rods to head. Pump test was good. Released the rig on 12-30-81.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED \_\_\_\_\_ TITLE Dist. Adm. Supvr. DATE JAN 11 1982

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE ACCEPTED FOR RECORD

CONDITIONS OF APPROVAL, IF ANY:

JAN 14 1982

\*See Instructions on Reverse Side

NMOCC

FARMINGTON DISTRICT  
BY Sm