

NEW MEXICO OIL CONSERVATION COMMISSION

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U.S.G.S.	
LAND OFFICE	
OPERATOR	1

5a. Indicate Type of Lease
 State Fee

5. State Oil & Gas Lease No.
 L-4681

7. Unit Agreement Name

8. Farm or Lease Name
 State HK Com.

9. Well No.
 1

10. Field and Pool, or Wildcat
 Wildcat Morrow

12. County
 Eddy

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REEVALUATE OR TO REEVALUATE TO A DIFFERENT RESERVOIR.
 USE APPLICATION FOR PERMIT TO DRILL (FORM C-101) FOR PROPOSALS TO DRILL OR TO REEVALUATE TO A DIFFERENT RESERVOIR.

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
 UNIT LETTER L 1980 FEET FROM THE South LINE AND 660 FEET FROM
 THE West LINE, SECTION 6 TOWNSHIP 24-S RANGE 35-E N.M.P.M.

15. Elevation (Show whether DF, RT, GR, etc.)
 3910 GR

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
 NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <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) SEE RULE 1103.

Moved in service unit 1-3-80. Tested casing with 1000# for 30 min. Test OK. Ran tubing to 10660' and spotted 200 gal 10% acetic acid. Ran correlation log. Perforated 10640'-10655' with 4 JSPF. Ran tubing, packer, and tailpipe. Packer set at 10179'. Tailpipe at 10262'. Currently shut-in evaluating additional completion procedures.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED Bob Davis TITLE Assistant Admin. Analyst DATE 1-18-80

APPROVED BY W.A. Gressett TITLE SUPERVISOR, DISTRICT II DATE JAN 23 1980

CONDITIONS OF APPROVAL, IF ANY:
 0+4 NMOC-D-A, 1-Hou, 1-Susp, 1-BD, 1-Montex, 1-Maralo, 1-Superior, 1-El Paso