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Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

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 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' FSL X 660' FWL, Sec. 10
AT TOP PROD. INTERVAL: (Unit L, NW/4, SW/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 ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

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5. LEASE
NM-0223201

RECEIVED

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

JUL 15 1982

7. UNIT AGREEMENT NAME

O. C. D.

8. FARM OR LEASE NAME ARTESIA, OFFICE
Midwest A Federal

9. WELL NO.

1

10. FIELD OR WILDCAT NAME

Sams Ranch Grayburg San Andres

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

10-14-28

12. COUNTY OR PARISH Chaves

13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
4168 GL

(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 2-11-81. Pulled tubing. Ran CIBP and set at 1670' and capped with 35' of cement. Spotted a 100' class C cement plug from 294'-194'. Spotted a 15 sack surface plug. Install PxA marker and moved out service unit.

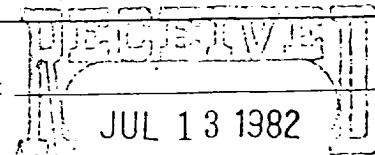
Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Mark Truman TITLE Ast. Adm. Analyst DATE 7-7-82

(This space for Federal or State office use)

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



Posted ID-2
7-19-82
PFA