

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTSUBMIT IN TR. CATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

45F

5. LEASE DESIGNATION AND SERIAL NO.

NM-0415461

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different level.)
Use "APPLICATION FOR PERMIT—" for such proposals.)

RECEIVED BY

NOV 07 1984

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ Water Source Well

2. NAME OF OPERATOR

Amoco Production Company

3. ADDRESS OF OPERATOR

P.O. Box 68, Hobbs NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)

At surface

990' FNL X 330' FEL
(NE 1/4, NE 1/4 Unit A)

7. UNIT AGREEMENT NAME

8. NAME OF LEASE NAME

Old Indian Draw Unit

9. WELL NO.

38

10. FIELD AND POOL, OR WILDCAT

Indian Draw Delaware

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

19-22-28

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3071.9' GR

12. COUNTY OR PARISH

Eddy

13. STATE

NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐

(Other)

PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON* ☐CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Spud ☒REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT* ☐(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

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.)*

Spud 9:00 A.M. 10-30-84 and drilled to TD of 40'. Set 16" conductor and cemented with 3 1/2 yds Redi-mix.

345 BLM, C 1-J.R. Barnett, Hon Am 21.156 1-F.J. Nash, Hon Am 4.206 1-GCC

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

SIGNED

Harry C. Clark

TITLE

Asst. Admin. Analyst

DATE

10-31-84

(This space for Federal or State police use)

APPROVED BY

GWO

TITLE

DATE

CONDITIONS OF APPROVAL NOV 1 1984

Carlsbad, NEW MEXICO

*See Instructions on Reverse Side