

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

COPY TO 2
SUBMIT IN TRIPlicate
(Other instructions
verse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-0202980

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 reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

AMOCO PRODUCTION COMPANY

3. ADDRESS OF OPERATOR

BOX 367, ANDREWS, TEXAS 79714

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

660' FSL x 660' FEL Sec. 25 (Unit P)

14. PERMIT NO.

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

4307' RDB

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

MIDWEST H FED

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

VADA- PENN

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

25-9-33 NMPM

12. COUNTY OR PARISH 13. STATE

LEA

N.M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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PULL OR ALTER CASING

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FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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REPAIRING WELL

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FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

Well Status

(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.)*

This well was S-I 8-27-74 because of low capacity & uneconomical to produce.

Recompletion possibilities are being investigated. If unattractive, well will be P+D. Expect work to be done in March, 1975.

NOV 1 1975

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

SIGNED

Ray R. Yorkum

TITLE ADMINISTRATIVE ASSISTANT

DATE

OCT 28 1974

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

4- USGS-14
1- DIV
1- SUSG
1- RRY

APPROVED

OCT 30 1974

ARTHUR R. BROWN
DISTRICT ENGINEER

*See Instructions on Reverse Side