

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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. CIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER DRILLING		5. LEASE DESIGNATION AND SERIAL NO. NM-0450847
2. NAME OF OPERATOR Amoco Production Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR BOX 68, HOBBS, N. M. 88240		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2005' FSL x 1873' FWL Sec 13 (Unit K, NE 1/4 SW 1/4)		8. FARM OR LEASE NAME FEDERAL A
14. PERMIT NO.		9. WELL NO. 7
15. ELEVATIONS (Show whether DF, RT, GR, etc.)		10. FIELD AND POOL, OR WILDCAT BOUGH DEVONIAN
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 13-9-35 NM PM
		12. COUNTY OR PARISH LEA
		13. STATE NM

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) **SPUDDING**

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.)*

**SHARP Orlg Co. spudded 17 1/2" hole 10:30 PM 10-21-71.
11 3/4" OD 47# BR K-55 Casing was set @
459' w/ 575 # Incon. Cement circ. After WOC
18 hours, tested casing w/ 1000 psi for 30 min.
Test O.K.**

**Reduced hole to 11" @ 459 and resumed
drilling.**

API Well No. 30-025-23902

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

SIGNED

AREA SUPERINTENDENT

TITLE

DATE **OCT 26 1971**

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

OCT 29 1971

*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

5- USGS-H
1- AC
1- SUSP
1- RR

RECEIVED

1971

OIL CONSERVATION COMM.
HOBBBS, H. M.