Form 9-331
May 1963

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE (Other instructions on reverse side)

Form approved.
Budget Bureau No. 42 R1424

5. LEASE DESIGNATION AND SERIAL NO.
NM-0145685

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 INJECTION WELL

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR
Amoco Production Company

8. FARM OR LEASE NAME
HORTON Federal

3. ADDRESS OF OPERATOR
BOX 68, HOBBS, N. M. 88240

9. WELL NO.
4

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
1650' FNL x 1650' FWL Sec 30 (F - SE/4 NW/4)

10. FIELD AND POOL, OR WILDCAT
MILNESAND SAN ANDRES

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
30-8-35

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
4230' R.D.B.

12. COUNTY OR PARISH
ROOSEVELT

13. STATE
N.M.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) ☐	
(Other) Convert to injection well X			

(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.)*

In accordance w/ NMOCC administrative order PMX-54 dated January 2, 1974, it is proposed to convert this well to injection per the attached sketch.

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

SIGNED Loy R. Yoakum TITLE ADMINISTRATIVE ASSISTANT DATE JAN 7 1974

(This space for Federal or State office use)

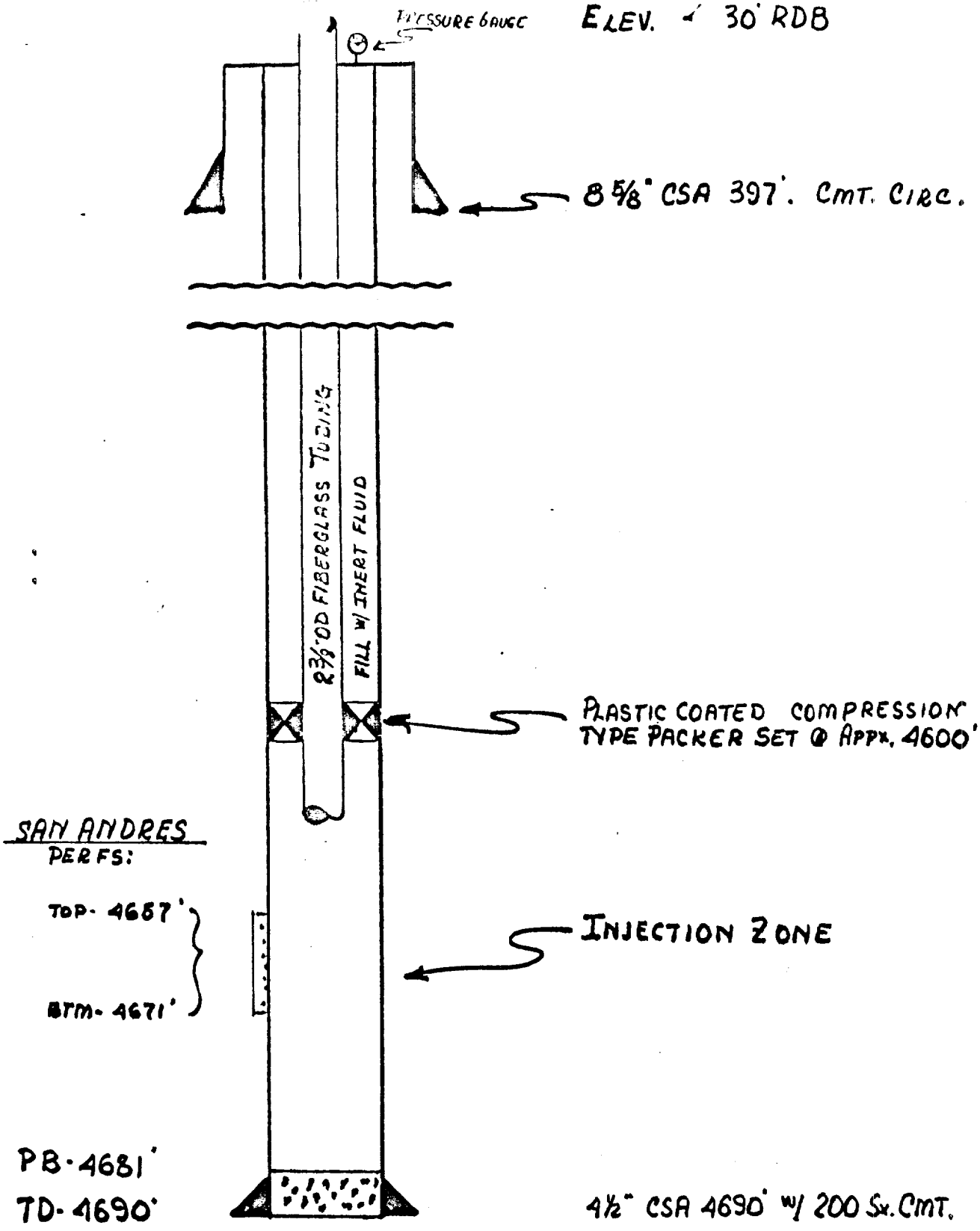
APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
JAN 10 1974
ARTHUR R. BROWN
DISTRICT ENGINEER

0+4- USGS-H
1- DIV
1- SUSP
1- RRY

*See Instructions on Reverse Side



MILNESAND-HORTON PRESSURE MTNCE PROJECT
MILNESAND-SAN ANDRES POOL
ROOSEVELT COUNTY, NEW MEXICO

Amoco Production Company

INJECTION WELL- HORTON FEDERAL WELL NO. 4
1650' FNL x 1650' FWL Sec 30, T-8-S, R-35-E

SCALE:

RRY

DRG. NO.