

**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 ☒ gas ☐ other ☐
 well 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. See space 17 below.)
 AT SURFACE: 2310' FSL X 929' FEL, Sec. 30
 AT TOP PROD. INTERVAL: (Unit I, NE/4, SE/4)
 AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
 FRACTURE TREAT ☐
 SHOOT OR ACIDIZE ☐
 REPAIR WELL ☐
 PULL OR ALTER CASING ☐
 MULTIPLE COMPLETE ☐
 CHANGE ZONES ☐
 ABANDON* ☐
 (other) ☐

SUBSEQUENT REPORT OF:

☐
☐
☒
☐
☐
☐
☐
☐

5. LEASE

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Horton Federal Unit

9. WELL NO.

1710. FIELD OR WILDCAT NAME:
Milnesand

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

30-8-35

12. COUNTY OR PARISH

Roosevelt

13. STATE

NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
4222' RDB**RECEIVED**

(NOTE: Report results of multiple completion or zone change by Form 9-331-C)

AUG 20 1980**U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO**

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 7-26-80. Ran packer and tubing and set packer at 4600'. Acidized well 1500 gallons 15% NEFE acid. Pumped 500 gallons 20# gelled brine and 300# 50/50 Mix of rock salt and paraformaldehyde. Pumped 1500 gallons 15% NEFE acid. Flushed with 12 bbls. CO2. Swabbed well. Pulled packer and ran pumping equipment. Returned well to production. Production after workover in 24 hrs. was 4 BO and 130 BW.

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

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

SIGNED

Mark K. Stutz

TITLE

Ast. Ad. Analyst

DATE

8-22-80

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

0+4-USGS, H1-Hou1-Susp1-MKE

*See Instructions on Reverse Side

ACCEPTED FOR RECORD**AUG 28 1980****U. S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO**