

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 well ☐ gas well ☐ other ☒ Injection

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 330' FWL, Unit L
AT TOP PROD. INTERVAL: Sec. 30, T-8-S, R-35-E
AT TOTAL DEPTH:

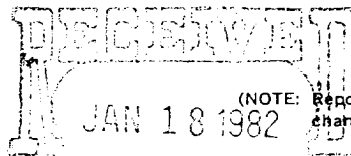
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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) ☒ Convert to injection

SUBSEQUENT REPORT OF:

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(NOTE: Report results of multiple completion or zone change on Form 9-330.)

U.S. GEOLOGICAL SURVEY
ROSWELL, 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 12-5-81. Lowered tubing and tagged RD at 4739'. Pulled tubing, rods, and pump. Ran tubing and treated packer. Acidized with 2500 gal 15% NEFE HCL acid and 250 gal MUSOL A in 2 equal stages separated by 400# graded rock salt in 200# of 100 mesh salt. Flushed. Pulled tubing and treated packer. Ran internally coated tubing and packer. Set packer at 4548'. Moved out service unit 12-8-81. Commenced water injection 1-2-82. Last 24 hr. injected 620 BWPD with tubing pressure 300 PSI. Returned to injection.

0+4-USGS, R 1-Hou 1-Susp 1-CLF

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

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

SIGNED Cathy L. Ferman TITLE Ast. Adm. Analyst DATE 1-13-82

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

PETER W. CHESTER

FEB 25 1982

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See Instructions on Reverse Side

5. LEASE

NM-0145685

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Horton Federal

9. WELL NO.

6

10. FIELD OR WILDCAT NAME

Milnesand- San Andres

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)

4230' RDB