

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. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR AMOCO PRODUCTION COMPANY		8. FARM OR LEASE NAME MORGAN FEDERAL
3. ADDRESS OF OPERATOR BOX 367, ANDREWS, TEXAS 79714		9. WELL NO. 8
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL x 660' FWL Sec. 13 (Unit L. NW/4 SW/4)		10. FIELD AND POOL, OR WILDCAT CHAUEROO SAN AND
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 13-7-33 NM PM
15. ELEVATIONS (Show whether DF, RT, GR, etc.) NA		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:

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) ☒ Well Status

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.)*

Well was shut in due to its limited producing capacity and was uneconomical to produce. Propose to leave in shut-in status pending further evaluation and possible use in secondary recovery operations.

TD- 4300'
PB- 4253'

4 1/2" CSA 4300' x 350 Sx.
8 7/8" CSA 358' x 325 Sx

PERFS: 4040-4249'

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

SIGNED

TITLE

ADMINISTRATIVE ASSISTANT

DATE

NOV 5 1974

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

NOV 6 1974

JIM SIMS
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side

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