

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions
verse 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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM-254700
2. NAME OF OPERATOR AMOCO PRODUCTION COMPANY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR BOX 367, ANDREWS, TEXAS 79714	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 1980' FNL X 660' FWL Sec 12 (Unit E)	8. FARM OR LEASE NAME Fischer Federal
14. PERMIT NO.	9. WELL NO. 2
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4199' RDB	10. FIELD AND POOL, OR WILDCAT Cato San Andres
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 12-8-30 NMPM
	12. COUNTY OR PARISH Chaves
	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)

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 3-71. There was a complete loss of production due to salt buildup in the annulus and in the downhole pump.

Well is to remain shut-in until further evaluation of secondary recovery operations for the Cato Basket Pressure Maintenance project are completed and a final waterflood operation is initiated. Final disposition of the wellbore will be determined at that time.

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

SIGNED

TITLE ADMINISTRATIVE ASSISTANT

DATE

OCT 15 1975

(This space for Federal or State office use)

APPROVED

CONDITIONS OF APPROVAL, IF ANY:

TITLE

UNLESS FURTHER APPROVED, WELL MUST
BE PUT TO BENEFICIAL USE OR PLUGGED BY
APRIL OCT 11 1976

DATE

*See Instructions on Reverse Side

RECEIVED
OCT 16 1975
U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

OCT 20 1975

R. E. BEEKMAN

DISTRICT ENGINEER

RECEIVED

OCT 21 1975

**O. C. C.
ARTESIA, OFFICE**

OCT 22 1975
U.S. DEPARTMENT OF COMMERCE
WASHINGTON, D. C.