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-01135

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 [X] GAS WELL [ ] OTHER

7. UNIT AGREEMENT NAME
PLAINS UNIT FEDERAL

2. NAME OF OPERATOR
Amoco Production Company

8. FARM OR LEASE NAME

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

9. WELL NO.
9

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface

1980' FNL x 1980' FWL Sec. 33 (Unit F, SE/4 NW/4)

10. FIELD AND POOL, OR WILDCAT
LUSK DELAWARE

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
33-19-32 NMPM

14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH	13. STATE
	3553' R.D.B.	LEA	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	[X]
FRACTURE TREAT	[ ]	MULTIPLE COMPLETE	[ ]	FRACTURE TREATMENT	[ ]	ALTERING CASING	[ ]
SHOOT OR ACIDIZE	[ ]	ABANDON*	[ ]	SHOOTING OR ACIDIZING	[ ]	ABANDONMENT*	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other) Well Status			[X]
(Other)				(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.) *

Attempt in production restoration - failure.
Squeezed perforations 4828-36' w/ 75sx Class H neat + 12½ gel 1sx Plug below retainer set @ 4815'.
Perforated interval 4790'-4900' w/ 2JSPF and acidized w/ 1000 gal 15%. In 4 hrs, swabbed 20 BW, no show of oil or gas.
Well Shut-In 11-27-72 for further evaluation and possible recompletion attempts.
OC- 11-20-72
Comp 11-27-72

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

SIGNED _____ TITLE AREA SUPERINTENDENT DATE DEC 4 1972

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD
DEC 6 1972
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

*See Instructions on Reverse Side

044- USGS-H
1- Div
1- Susp
1- Mobil