

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions reverse side)

Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

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

12. COUNTY OR PARISH

13. STATE

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 ☒ GAS WELL ☐ OTHER ☐
2. NAME OF OPERATOR **Amoco Production Company**
3. ADDRESS OF OPERATOR **P.O. Box 3092 Houston, TX 77253**
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface **660' FSL x 1980' FEL**
(Unit D, SW/4, SE/4)

14. PERMIT NO

15. ELEVATIONS (Show whether DE, RT, GR, etc.)

3680.7' GL

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

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANE

(Other) **Squeeze Perforations**

(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.)

MI AND RUSU 8-17-88. PULLED Rods AND Pump. Install BOP And Rel PKR - Pull Tubing AND PKR: SET Retractable Bridge Plug at 1105' AND Packer at 10802'. CMT SQZ perfs 10890' - 10914' with 125 SxS CLASS H with 2% CaCl AND Drill out, Pull RBP, ACIDIZE PERFS 11170' - 11204' with 4000 gals 20% NEFE HCL AND FLUSH with 2% KCL. RIH with Rods AND pump.

BWD: 0 BOPD AND 0 BWPD

AWO: 183 BOPD AND 50 BWPD AND 241 MCFD

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

SIGNED

Blake T. Steele

TITLE

Admin Analyst

DATE

5-1-89

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF

TITLE

DATE

*See Instructions on Reverse Side

RECEIVED

JUN 19 1989

OCD
HOBBS OFFICE