

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE  
(Other instructions on re-  
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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM-077002	
2. NAME OF OPERATOR Amoco Production Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Drawer A, Levelland, Texas 79336		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 660' FSL x 1980' FEL, Sec.6 (Unit 0, SW/4 SE/4) U		8. FARM OR LEASE NAME Nellis Federal	
		9. WELL NO. 2	
		10. FIELD AND POOL, OR WILDCAT Undy Buffalo Penn Morrow	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 6-19-33	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3699.7 RDB	12. COUNTY OR PARISH Lea	13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Spud <input type="checkbox"/>	(Other) <input checked="" type="checkbox"/>

(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.) \*

MGF Drilling Co. Rig No. 26 spudded 17½" hole at 12 P.M. 1/24/78. Reached TD of 430' 1/25/78. Run 13-3/8" 48# H-40 ST&C casing and set at 430'. Cement with 205 sx Class H plus 2% CACL and ½# / sx celephane and 225 sx Class H plus 2% CACL. Plug down at 10 A.M. 1/25/78. Circulate 100 sx cement to surface. WOC 22½ hrs. Test casing w/600# for 30 min. Test ok. Reduced hole to 12¼" and resumed drilling.

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

SIGNED Ray W. Cox TITLE Administrative Supervisor DATE 2-9-78

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

0 & 4-USGS-H  
1-Div.  
1-Susp.  
1-RC  
1-Conoco-H

\*See Instructions on Reverse Side

