

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE
(Other instructions on reverse side)Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

NM 077002

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		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Amoco Production Company		8. FARM OR LEASE NAME Nellis Federal	
3. ADDRESS OF OPERATOR P. O. Drawer A, Levelland, Texas 79336		9. WELL NO. 2	
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)		10. FIELD AND POOL, OR WILDCAT Buffalo Penn Morrow	
14. PERMIT NO.		15. ELEVATIONS (Show whether DF, RT, GR, etc.)	
		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:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <u>Revised Casing Design</u>	<input checked="" type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(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.)*

Final casing design for the intermediate and production casing strings is listed below:

9-5/8" Casing

0 - 3560'	36# K-55 ST & C
3560' - 5000'	36# S-80 ST & C

5-1/2" Casing

0 - 80'	20# N-80 LT & C
80' - 620'	17# K-55 Buttress
620' - 2100'	15.5# K-55 Buttress
2100' - 4220'	17# K-55 Buttress
4220' - 4940'	17# K-55 LT & C
4940' - 5700'	17# K-55 ST & C
5700' - 10,740'	17# N-80 LT & C
10,740' - 13,700'	20# N-80 LT & C

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

SIGNED Randy AtkinsTITLE Assistant Admin. AnalystDATE 1-10-78

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

0 + 4 USGS, Hobbs
1 Div
1 Susp
1 Conoco

*See Instructions on Reverse Side

