

UNIT STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
HOBBS, NEW MEXICO 88240

SUBMIT IN TRIPlicate
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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 ☒ <i>PXA</i>	5. LEASE DESIGNATION AND SERIAL NO. <i>NM-077002</i>
2. NAME OF OPERATOR <i>AMOCO PRODUCTION COMPANY</i>	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <i>P.O. BOX 68 HOBBS, NEW MEXICO 88240</i>	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 <i>1980' FNL x 660' FWL (UNIT E, SW1/4, NW1/4)</i>	8. FARM OR LEASE NAME <i>Nellis A Federal</i>
14. PERMIT NO. <i>3002525912</i>	9. WELL NO. <i>4</i>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <i>3667.8' GR</i>	10. FIELD AND POOL, OR WILDCAT <i>Tonto Bone Springs</i>
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <i>8-19-33</i>
	12. COUNTY OR PARISH <i>Lea</i>
	13. STATE <i>NM</i>

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐
REPAIR WELL ☐	CHANGE PLANS ☐
(Other) ☐	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☒
(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.) *

1. MISC 1-16-86 and POH with production equipment.
2. RIH w/ CIB and set at 10,300'. Capped CTBP w/ 255X class H cement.
3. Displaced casing w/ 25# BBLs gelled brine.
4. Pulled up to 7700' and set 255X class H cement plug.
5. Pulled up to 6300' and set 255X class H cement plug.
6. Perforated 5025-26' w/ 4 SPF.
7. RIH w/ cement retainer and set at 4935'. Pumped 505X class C cement.
8. Pulled up and Perforated 3157-58' w/ 4 SPF. Pumped 505X class C cement.
9. Pulled up and Perforated 1600-1601' w/ 4 SPF.
10. Set retainer at 1500' and pumped 505X class C cement.

0 + 5 BLM C, 1 - JRB, 1 - FJN, 1 - CMH

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

SIGNED *Charles M. Helling*

TITLE *Administrative Analyst (SG)*

DATE *1-22-86*

(This space for Federal or State office use)

APPROVED BY *Scott Adams*
CONDITIONS OF APPROVAL, IF ANY:

TITLE *AREA INCHARGE*
CARLSBAD RESOURCE AND

DATE *6-19-86*

*See Instructions on Reverse Side

m

11. Perforated 600-601' and pumped 5105X class C cement. Circulated cement to surface.
12. Cut off well head and erected PxA marker.
13. MOB 1-22-86.

RECEIVED
JUN 23 1986
C.C.F.
HUGHES SERVICE