

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

5. Lease Designation and Serial No.
IC 065710

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
Amoco Federal # 2

9. API Well No.
30 02530572

10. Field and Pool, or Exploratory Area
West Lusk Delaware

11. County or Parish, State
Lea County, New Mexico

SUBMIT IN TRIPLICATE

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
Woodbine Petroleum Corporation

3. Address and Telephone No.
1445 Ross Avenue, Lock Box 246, Dallas, Texas 75202

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
990' FNL & 1650' FWL, Section ²¹11, T19S, R32E

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
☐ Notice of Intent	☐ Abandonment	☐ Change of Plans
☒ Subsequent Report	☒ Recompletion	☐ New Construction
☐ Final Abandonment Notice	☐ Plugging Back	☐ Non-Routine Fracturing
	☐ Casing Repair	☐ Water Shut-Off
	☐ Altering Casing	☐ Conversion to Injection
	☐ Other _____	☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

- 3-2-92 Perforate 4856' - 4867' KB., 23 Holes. PBTD 4995' KB.
Acidize with 1000 gallons NETE 15% Acid.
- 3-3-92 Frac with total of 20,000 gallons CXB-135, 6000 Gallons C-135 and
43,750 #16/30 Texsand. Bridge Plug at 5005' KB.
- 3-5-92 Set 2 3/8" Tubing at 4934' KB.

RECEIVED FOR RECORD
Adm

APR 6 - 1992

ALABAMA, NEW MEXICO

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

Signed *Christine Surgenor* Title Vice President Date 4-1-92

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any:

CT

RECEIVED

APR 27 1992

JOCD HOBBS OFFICE