

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☐ gas ☐ other PXA
well well

2. NAME OF OPERATOR
Amoco Production Company

3. ADDRESS OF OPERATOR
P. O. Box 68, Hobbs, New Mexico 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FNL X 690' FWL
AT TOP PROD. INTERVAL: (Unit E, SW/4, NW/4)
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

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

SUBSEQUENT REPORT OF:

☐
☐
☐
☐
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☐
☐
☐
☒

RECEIVED
1983

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

Moved in service unit 12-30-82. Installed BOP. Cut 7" casing at 2250'. Pulled 7" casing. Ran 2-7/8" tubing. Spotted 100 sacks class C neat cement from 2297'-2030'. Tagged cement at 2030' with wireline. Displaced hole with 10# brine with 25# gel per barrel. Pulled tubing. Perforated 9-5/8" casing at 330' with 4 JSPF. Pumped 225 sack class C neat cement down casing and circulated behind 9-5/8" casing to surface. Left 9-5/8" casing full of cement to surface. Welded on cap and installed PXA marker. Moved out service unit 1-9-83.

0+6-BLM, R 1-HOU 1-DMF 1-W. Stafford, HOU

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Mark Freeman TITLE Ast. Adm. Analyst DATE 1-14-83

APPROVED (This space for Federal or State office use)

APPROVED BY (Print Name) PETER W. CHESTER
CONDITIONS OF APPROVAL, IF ANY:

MAR 1 1983
FOR
JAMES A. GILLHAM
DISTRICT SUPERVISOR

*See Instructions on Reverse Side