

N. M. OIL CONS. COMMISSION
P. O. BOX 1000
HOBBS, NEW MEXICO 88240
UNITED STATES

Form Approved.
Budget Bureau No. 42-R1424

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 ☐ well gas ☒ well other ☐
2. NAME OF OPERATOR
Amoco Production Company
3. ADDRESS OF OPERATOR
P. O. Box 68, Hobbs, NM 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL X 1980' FWL, Sec. 11
AT TOP PROD. INTERVAL: (Unit K, NE/4, SW/4)
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

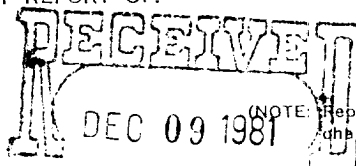
5. LEASE
NM 40452
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Federal BS Gas Com.
9. WELL NO.
1
10. FIELD OR WILDCAT NAME
Und. Bone Springs
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
11-18-32
12. COUNTY OR PARISH
Lea
13. STATE
NM
14. API NO.
30 025 27430
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3867.8' RDB

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

OIL & GAS
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

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.)*

Swabbed 28 hrs and recovered 80 BW, 18 BO, and a show of gas. Acidized with 5000 gal. 30 lb. gelled brine and 15000 gal 50 lb. gelled 15% HCL. MOSU (X-Pert #15) 11-13-81. MISU (McCasland #8) 11-16-81. Swabbed 70 hrs. and recovered 901 BW and had slight show of gas. MOSU 11-19-81. Currently evaluating.

0+6-USGS, R 1-Hou 1-Susp 1-W. Stafford, Hou 1-DMF

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

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

SIGNED Mark Luman TITLE Ast. Adm. Analyst DATE 12-8-81

APPROVED BY
ROGER A. CHAPMAN
CONDITIONS OF APPROVAL, IF ANY:

DEC 11 1981

U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO

*See Instructions on Reverse Side