

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
MEXICO 88240

SUBMIT IN TRIPlicate  
(Other instructions on reverse side)

5. LEASE DESIGNATION AND SERIAL NO.  
LC-064009 (c)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Federal "DM"

9. WELL NO.  
1

10. FIELD AND POOL, OR WILDCAT  
Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
8-18-32

12. COUNTY OR PARISH  
Lea

13. STATE  
NM

**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

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 and in accordance with any State requirements.\* See also space 17 below.)  
At surface  
760/n + 960/E Unit A

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, OR, etc.)  
3815.9 GL

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PCLL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(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 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.)\*

MI and RUSU. Spot 25 sx cement plugs at 4618, 4335, 3836, 2906, 2502, 1213 and 512. Surface plug from 92 feet to surface. Dig out cellar and cut off wellhead. Weld on PXA Marker. MOSU 4-30-87.

ACCEPTED FOR RECORD

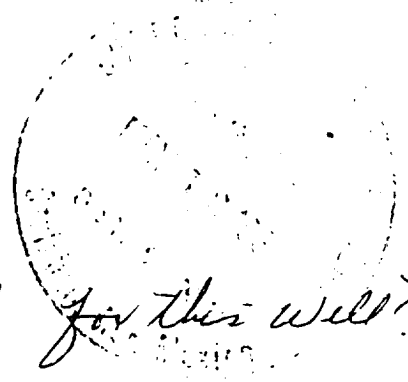
MAY 14 1987

10-12-87

SJS  
CARLSBAD, NEW MEXICO

To: BLM (Cecilia)

Do you have a well record for this well?  
 Evelyn - OCA



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

SIGNED [Signature] TITLE Sr. Admin. Analyst DATE 5-11-87  
O.M. Mitchell

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

Approved by \_\_\_\_\_  
 Liability under this permit is limited to the surface operations completed.

\*See Instructions on Reverse Side