

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.)

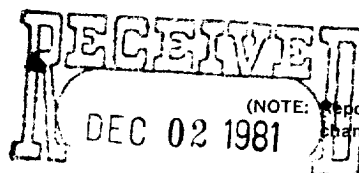
1. oil well ☒ gas well ☐ other ☐
2. NAME OF OPERATOR
Amoco Production Company
3. ADDRESS OF OPERATOR
P. O. Box 68, Hobbs, NM 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1980' FSL X 1920' FEL, Sec. 24
AT TOP PROD. INTERVAL: T-20-S, R-36-E, Unit J
AT TOTAL DEPTH:
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:

- ☐
☒
☐
☐
☐
☐
☐
☐



(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.)*

Moved in service unit 11-2-81. Pulled tubing, rods, and pump. Ran bit, drill collars, and tubing. Tagged fill at 3832'. Cleaned out 3832-58'. Pulled tubing up into casing. Tagged bottom at 3858'. Pulled tubing and tools. Ran gamma ray, compensated neutron log, and carbon/oxygen log 3858'-2400'. Ran tubing and packer set at 3703'. Ran gamma ray and base temp survey. Acidized with 12000 gal 15% Sta-Live acid, 88000 SCF N2, and 900# rock salt in 3 stages. Ran gamma ray temp survey. Swab tested for 22 hrs. and recovered 278 BLW. Pulled tubing and packer. Ran tubing to 3830'. Ran rods and pump. Moved out service unit 11-13-81. Pump tested for 185 hrs and pumped 59 B0, 250 BLW, 712 BW, and 411 MCF. Returned to production.

0+4-USGS, R 1-Hou 1-Susp 1-CLF

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

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

SIGNED Cathy L. Forman TITLE Ast. Adm. Analyst DATE 11-30-81

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

DEC 11 1981
OCT
U.S. GEOLOGICAL SURVEY
ROSWELL, NEW MEXICO