

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-025-04316

5. Indicate Type of Lease
Federal ☐ STATE ☐ FEE ☐

6. State Oil & Gas Lease No.

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"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator
Amoco Production Company

3. Address of Operator
P. O. Box 3092, Houston, TX 77253

4. Well Location
Unit Letter F : 1980 Feet From The North Line and 1980 Feet From The West Line
Section 24 Township 20-S Range 36-E NMPM Lea County

10. Elevation (Show whether DP, RKB, RT, GR, etc.)
3568' RDB

7. Lease Name or Unit Agreement Name

Gillully /A/ Federal

8. Well No.
13

9. Pool name or Wildcat
Eunice-Monument GSA

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Cmt squeeze, Acidize & Drill Formation ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

RUSU 2/11/91

Squeezed intervals 3554-3615 w/ 134 sx class C cmt w/ 2% CACL. Circulated out 20 bbls slurry Drill out to 3720'.

Squeezed intervals 3554-3615 w/50 sx class C cmt. Reverse out 17 sx cmt Drill out to 3720'.

Squeezed intervals 3554-3615 w/50 sx class C cmt. Reverse out 2 bbls cmt. Drill out to 3720'.

Acidized squeeze zone w/500 gals 15% HCL.

Squeezed intervals 3554-3615 w/210 sx class C cmt. Reverse out 76 sx cmt.

Drill out cmt to 3865'

Drill new formation to 3870'

Returned to Chevron

RDSU 3/7/91

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Kim A. Colvin TITLE Asst. Admin. Analyst DATE 6/4/91

TYPE OR PRINT NAME Kim, A. Colvin TELEPHONE NO. 596-7686

(This space for State Use)

FOR RECORD ONLY

JUN 25 1991

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: