

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. Drawer "A", Levelland, Texas 79336

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 840' FNL X 2080' FEL, Sec 24 (Unit B)
AT TOP PROD. INTERVAL: NW $\frac{1}{4}$, NE $\frac{1}{4}$)
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* ☐

SUBSEQUENT REPORT OF:

(other) casing & casing test ☒

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

5. LEASE
LC-031735-a

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Gillully A Federal

9. WELL NO.
16

10. FIELD OR WILDCAT NAME
Funice-Monument (Grayburg)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
24-20-36

12. COUNTY OR PARISH
Lea

13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
3536.6 GR

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.)*

Drilled to TD 4102' and ran 5 1/2" 14# J-55 and 14# K-55 casing set at 4102'. Cemented with 581 sx Class C Plus additives. Circulated 116 sx. PD 4:30 a.m. 12/24/78. Released rig 10:00 a.m. 12/24/78. WOC 6 days. Drilled out cement plug 4056'-4090'. Test casing 1500# for 30 minutes. Test O.K.

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

SIGNED Ray Cox TITLE Admin. Supervisor

DATE January 5, 1979

(This space for Federal or State Office Use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

1-Houston
1-SUSP
1-DE

ACCEPTED FOR RECORD

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*See Instructions on Reverse Side

