UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

Form 9–331 Dec. 1973	Form Approved. Budget Bureau No. 42–R1424
UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	LC-031736 (a)
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME CA-4659
(Do not use this form for proposals to drill or to deepen or plumback to a different reservoir. Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME
1. oil gas and and an arrangement of the second of the sec	Gillully Federal Gas Com
well well other with 15 1979	9. WELL NO.
2. NAME OF OPERATOR	Y 17
2. NAME OF OPERATOR Amoco Production Company 3. ADDRESS OF OPERATOR P. O. Box 68 Hobbs NM 949885, NEW MEXICO	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR P. O. Box 68, Hobbs, NM 88240	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA
below.) 2200' FNL & 660' FEL Sec. 24	24-20-36
AT SURFACE: 2200 THE & 000 TEE Sec. 24 AT TOP PROD. INTERVAL: (Unit H, SE/4 NE/4)	12. COUNTY OR PARISH 13. STATE
AT TOTAL DEPTH:	Lea NM
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE.	14. API NO.
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
	3540.4 GR
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF	No. of the second
FRACTURE TREAT	
SHOOT OR ACIDIZE	
PULL OR ALTER CASING	(NOTE: Report results of multiple completion or zone change on Form 9-330.)
MULTIPLE COMPLETE	
CHANGE ZONES ABANDON*	3.1
(other) Extension	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is d	irectionally drilled, give subsurface locations and
measured and true vertical depths for all markers and zones pertinen	t to this work.)*
Request extension of drilling permit for 1	vear from initial approval date
parameter and an arrange parameter to the terminal parameter to the te	year from inferent approvat date
of May 2, 1979.	•
hal	10
Unless Drilling Operations has	oval
nmilling appropriations appropriations	
Unless od, this 2	
Commenced	
Unless Drilling Operations has Commenced, this drilling approach Expires	
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	*
SIGNED Kay Cox TITLE Admin. Supervi	isor _{DATE} 6-13-79
(This space for Federal or State office use)	
Y term	
APPROVED BY TITLE	= OVFD
0+5 - USGS-H 1 - BD	PROVED

TITLE Admin. Supe SIGNED (This space for Federal or State APPROVED BY TITLE _ CONDITIONS OF APPROVAL, IF ANY: 0+5 - USGS-H 1 - BD 1 - Hou 1 - Susp 1 - Arco

*See Instructions on Reverse SUUN 18 1979 ACTING DISTRICT ENGINE

RECEIVED

JUN 1 9 1979

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