

N. M. OIL CONS. COMMISSION  
P. O. BOX 1980  
HOBBS, NEW MEXICO 88240

Form 9-331  
Dec. 1973

Form Approved.  
Budget Bureau No. 42-R1424

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 ☐ gas ☒ other ☐  
2. NAME OF OPERATOR  
AMOCO PRODUCTION CO.  
3. ADDRESS OF OPERATOR  
P. O. Box 68 Hobbs, NM 88240  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
1980 FNL x 1980 FWL,  
AT SURFACE: Sec. 19 (Unit F, SE/4, NW/4)  
AT TOP PROD. INTERVAL:  
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) Spud

SUBSEQUENT REPORT OF:

- ☐  
☐  
☐  
☐  
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RECEIVED  
SEP 18 1981

OIL & GAS  
U.S. GEOLOGICAL SURVEY  
ROSWELL, NEW MEXICO

5. LEASE

NM 17441

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

El Alto Grande

Unit

9. WELL NO.

10. FIELD OR WILDCAT NAME

Wildcat Deyonian

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

19-22-34

12. COUNTY OR PARISH

Lea

13. STATE

NM

14. API NO.

30-025-27524

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
(3561.3 GL)

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.)\*

Between 8-28-81 & 9-8-81, Abbott #3 spudded a 12 1/4 hole using cable tools; drilled to 135'. Moved in Moranco Unit #1 on 9-10-81. Currently drilling with rotary tools.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Mark Randolph TITLE Assist. Admin. Analyst DATE 9-10-81

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

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