

**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  
well well

2. NAME OF OPERATOR

Amoco Production Company

3. ADDRESS OF OPERATOR

P. O. Box 68, Hobbs, NM

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

**FEL**  
AT SURFACE: 1980' FSL & 1980' FSL, Sec 7  
AT TOP PROD. INTERVAL: (Unit J, NW/4 SE/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\* ☐  
(other) Cancellation

SUBSEQUENT REPORT OF:

☐  
☐  
☐  
☐  
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☐  
☒

5. LEASE

LC-030180-b

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Farnsworth B Federal

9. WELL NO.

11

10. FIELD OR WILDCAT NAME

Scarborough Yates Seven Rivers

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

7-26-37

12. COUNTY OR PARISH

Lea

13. STATE

NM

14. API NO.

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

2968.7 GR

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

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.)\*

The drilling of this well has been canceled by Amoco. Please cancel our approval to drill.

**RECEIVED**

JUN 22 1979

**U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO**

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

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

SIGNED

Ray Cox

TITLE Admin. Supv.

DATE

6-20

(This space for Federal or State office use)

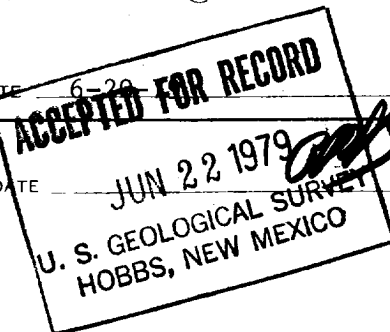
APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

0 + 4 NMOCD-H 1-Susp 1-Hov 1-BD



DATE: 10/10/2010  
 TIME: 10:00 AM

RECEIVED

JUN 26 1973

O. C. C.