

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 ☐
well well other

2. NAME OF OPERATOR

Amoco Production Company

3. ADDRESS OF OPERATOR

P.O. Drawer "A", Levelland, TX 79336

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

AT SURFACE: 890' FSL & 890' FWL, Sec 18

AT TOP PROD. INTERVAL: (Unit D, NW/4 NW/4)

AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐CHANGE ZONES ☐ABANDON* ☐

(other)

5. LEASE
LC-030180-a

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Farnsworth Federal A9. WELL NO.
1210. FIELD OR WILDCAT NAME
Scarborough Yates-Seven Rivers11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
18-26-3712. COUNTY OR PARISH
Lea13. STATE
NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)
2969 RDB

(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.)*

Ran tubing and set cast iron bridge plug at 3060'. Perforated 2989'-2994' using 4 JSPF. Ran tubing and packer. Spotted 2 BBL 15% NE acid across perf interval. Set packer at 2878' and seating nipple set at 2938'. Acidized with 500 gal 15% NE acid. Swabbed well. Pulled tubing and packer. Ran tubing. Installed pumping equipment. Moved out service unit 3/24/79. Currently pump testing well.

RECEIVED

APR 10 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. Supervisor

March 29, 1979

(This space for Federal or State use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

0+4-USGS,H

1-Houston

1-RWA

1-Susp

*See Instructions on Reverse Side

UNITED STATES DEPARTMENT OF AGRICULTURE
WASHINGTON, D. C. 20250

RECEIVED
FEBRUARY 1964
OFFICE OF THE
DIRECTOR