

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. Box 68, Hobbs, New Mexico 88240  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1980' FSL X 1980' FEL, Sec. 6  
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:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input checked="" type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input type="checkbox"/>
(other) <input type="checkbox"/>	<input type="checkbox"/>

5. LEASE  
NM-13647  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME  
Perro Grande Unit  
9. WELL NO.  
1  
10. FIELD OR WILDCAT NAME  
Wildcat Strawn  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
6-26-35  
12. COUNTY OR PARISH  
Lea  
13. STATE  
NM  
14. API NO.  
30-025-27359  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
3279.6 GL

(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.)\*

Moved in service unit 12-16-82. Load tubing, released packer and circulated. Install BOP and pull tubing and packer. Ran cast iron bridge plug and set at 15,628. Loaded hole with 4 BLW. Tested plug and 500 psi for 10 min. -OK. Capped cast iron bridge plug with 50' of cement. Ran Vann Gun, packer and tubing. Packer set at 14,424' and test at 500 psi for 15 min -OK. Drop bar to perf Strawn intervals 14,570'-87' with 4 SPF. Well started flowing at 5200 psi on 22/64 choke. Opened choke to 32/64 and well flowed 1500 psi for 5 hrs. with NSO and NSW. Moved out service unit on 12-23-82. Moved in and installed test equipment 12-23-82. Left well shut in for 96 hrs. and tubing pressure increased to 9500 psi. Began flow test. Well flowed for 9 hrs. at a rate of 1005 MCFD, 36 BC, 21 BW with a tubing of 2200 psi. Currently flow testing.

0+6-MMS, R 1-HOU 1-CMH 1-W. Stafford, HOU 1-Superior, MId.

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

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

SIGNED Charles M. Leving TITLE Ast. Adm. Analyst DATE 12-30-82

ACCEPTED FOR RECORD (Orig 5-4) PETER W. CHESTER  
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL JAN 17 1983

MINERALS MANAGEMENT SERVICE  
ROSWELL, NEW MEXICO

\*See Instructions on Reverse Side

JAN 4 1983

M. (Held)