

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLI  
(Other instructions on  
reverse side)

Form approved  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-032511-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input checked="" type="checkbox"/> <i>w/ Dual - Injection</i>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Amoco Production Company	8. FARM OR LEASE NAME LANGLIE A 7ED
3. ADDRESS OF OPERATOR BOX 68, HOBBS, N. M. 88240	9. WELL NO. 2
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  1980' FSL x 660' FWL Sec 9 (L, NW/4 SW/4)	10. FIELD AND POOL, OR WILDCAT
14. PERMIT NO.	11. SEC., T., R., M., OR B.L.K. AND SURVEY OR AREA 9-25-37 NMPM
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3160' GL	12. COUNTY OR PARISH LEA
	13. STATE N.M.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
(Other) ☐

PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
ABANDON\* ☐  
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐  
FRACTURE TREATMENT ☐  
SHOOTING OR ACIDIZING ☐  
(Other) *Dual Well*

REPAIRING WELL ☐  
ALTERING CASING ☐  
ABANDONMENT\* ☒

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)

In accordance w/ form 9-331 submitted 4-24-72, well was dually completed in accordance w/ NMOC order R-4051.

Killed Ormet Gas zone- Drilled out open hole to 3473' Acidized open hole section w/ 200 gal 15% HSTNE. Ran Dual completion plastic coated tubing and packer per attached schematic.

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

SIGNED

TITLE AREA SUPERINTENDENT

DATE MAY 31 1972

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

04- USGS- 4  
1- Div  
1- SusP  
1- UNION Tex Pet  
1- RRY

\*See Instructions on Reverse Side

ACCEPTED FOR RECORD

JUN 5 1972

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO