

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No LC-032450 (a)
2. Name of Operator Amoco Production Company	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P. O. Box 3092, Houston, TX 77253-3092 Room 18.108	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 660 FNL x 1980 FNL (Unit Letter C) Sec. 22, T-24-S, R-37-E	8. Well Name and No. South Mattix Unit Federal #19
	9. API Well No. 30-025-21308
	10. Field and Pool, or Exploratory Area Fowler Upper Yeso
	11. County or Parish, State Lea, NM

CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other Temporary Abandonment
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

13. 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.)
PRESSURE TEST WELL AS PER APPLICABLE REGULATIONS AND SUBMIT TEST IN APPLICATION FOR EXTENSION OF TEMPORARY ABANDONMENT APPROVAL.

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

JUSTIFICATION: HOLD WELL FOR POTENTIAL USE IN SOUTH MATTIX WATERFLOOD.

RECEIVED
FEB 16 10 33 AM '94
O&H
AREA

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

Signed <u>Shannon J. Sauer</u>	Title <u>Staff Assistant</u>	Date <u>2/4/94</u>
(This space for Federal or State office use)		
Approved by <u>Orig. Signed by Shannon J. Sauer</u>	Title <u>PETROLEUM ENGINEER</u>	Date <u>3/7/94</u>
Conditions of approval, if any:		

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statement or representations as to any matter within its jurisdiction.

*See instruction on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

FORM APPROVED
Bureau of Land Management
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
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SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Amoco Production Company

(713) 366-7686

3. Address and Telephone No.

P. O. Box 3092, Houston, TX 77253-3092 Room 18.108

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

660 FNL & 1980 FNL (Unit Ltr. C)

Sec. 22, T-24-S, R-37-E

5. Lease Designation and Serial No.

LC-032450(a)

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

S. Mattix Unit Federal #19

9. API Well No.

30-025-21308

10. Field and Pool, or Exploratory Area

Fowler Upper Yeso

11. Country or Parish, State

Lea, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☒ Abandonment *Extension*
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

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

13. 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.)*

This well is currently in a temporary abandonment status. Submitted for BLM's approval for extension of temporary abandonment status is the attached pressure test dated 2/9/94, evidencing that pressure held at 520 PSI for over 30 mins.

APPROVED FOR 12 MONTH PERIOD

ENDING 2/9/95

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

Signed Shannon J Shaw

Title Staff Assistant

Date 3-15-94

(This space for Federal or State office use)

Approved by Shannon J Shaw

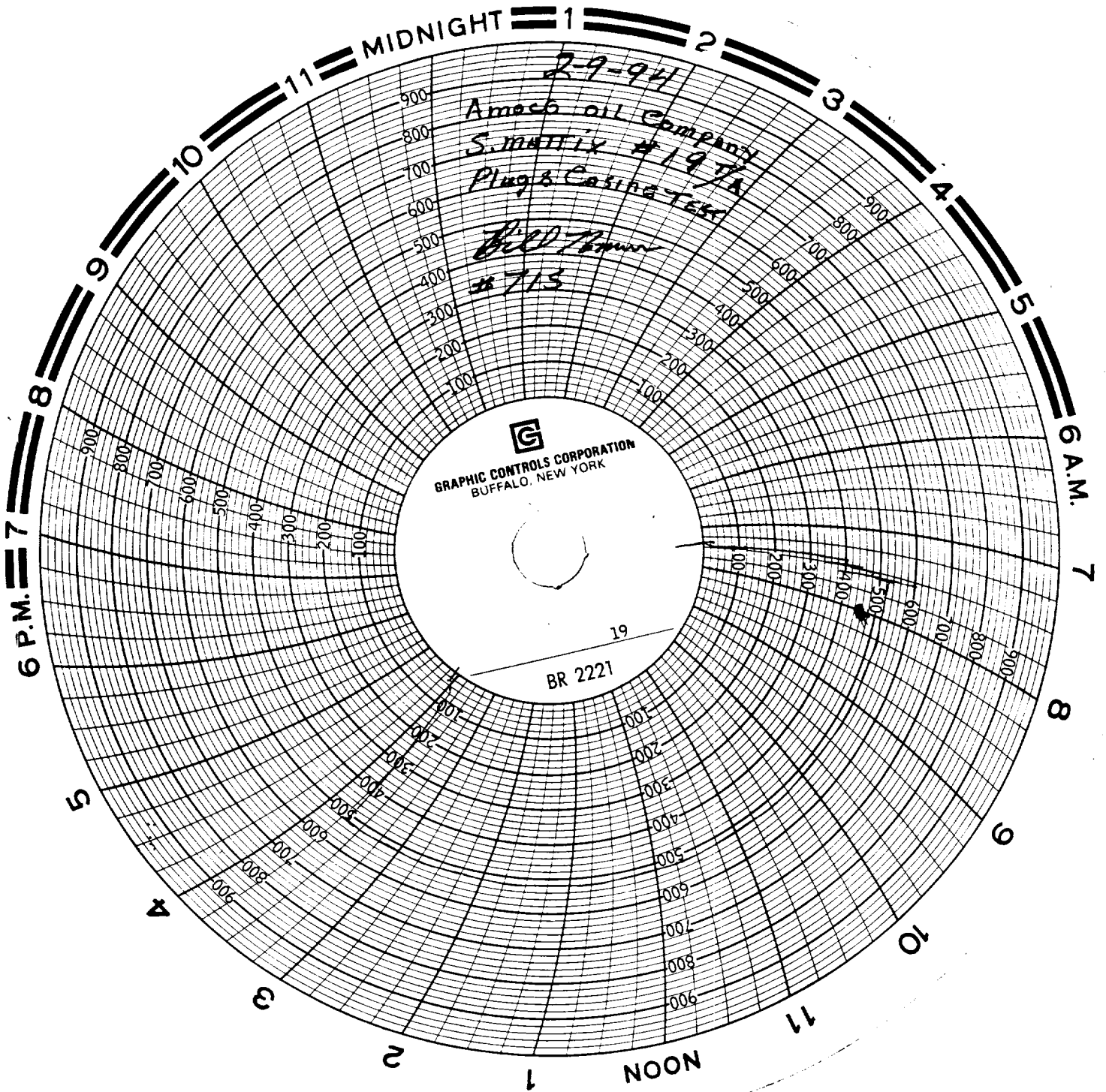
Title PETROLEUM ENGINEER

Date 3/29/94

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side



UNITED STATES
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BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
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SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. LC-032450(2)
2. Name of Operator Amoco Production Company	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. Box 3092, Houston, TX 77253	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 660' FNL X 1980' FWL Unit C Sec. 22, T-24-S, R-37-E NE/4, NW/4	8. Well Name and No. South Mattix Unit Fed. #19
	9. API Well No. 30-025-21308 ✓
	10. Field and Pool, or Exploratory Area Fowler, Upper Yeso
	11. County or Parish, State Lea, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other Temp. Abandon	<input type="checkbox"/> Dispose Water

13. 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.)*

MIX RUSU
POH X LAY DOWN PRODUCTION EQUIPMENT
SET CIBP @ 5185'
PRESSURE TEST @ 560psi X 30 MIN X TEST O.K. X LOAD HOLE W/
PACKER FLUID X RDSU X WELL TEMP. ABDN. 6-26-92.

APPROVED BY 112 ADMIN. OFFICE

ENDING 6-26-93

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

Signed H. J. Beaman

Title Stf. Admin. Analyst

Date 9-29-92

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date 10/14/92

