

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE\*  
(Other instructions re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-7488

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

MYERS "B" FEDERAL

9. WELL NO.

25

10. FIELD AND POOL, OR WILDCAT

LANGLIE MATTIX

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

21-24-37 NMPM

12. COUNTY OR PARISH

LEA

13. STATE

NM

## 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 ☒ GAS WELL ☐ OTHER ☐
2. NAME OF OPERATOR  
AMOCO PRODUCTION COMPANY
3. ADDRESS OF OPERATOR  
P.O. DRAWER A, LEVELLAND, TEXAS 79336
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface

660' FNL x 660' FWL Sec. 21 (Unit D, NW/4 NW/4)

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

## 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)

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.)\*

WORKOVER TO REMOVE SCALE. PRIOR TO WD Pmp. 20 BO x  
2 BW 24 Hrs. OC 4-29-76. Acidized w/ 1000 gal.  
15% NE and returned to pumping.

PROD after WD PMP 36 BO x 3 BLW x 10.71 MCF  
24 HRS GOR 298.

TD-3696  
PBD-3672

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

SIGNED

Ray W. Cox

TITLE

Administrative Assistant

DATE

5/28/76

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

044-4565-H  
1- Div.  
1- Susp.  
1- RC

\*See Instructions on Reverse Side

ACCEPTED FOR RECORD

JUN 2 1976

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO