

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate
(Other instructions on
reverse side)

Form approved,
Bureau Order No. 42 R1424.
5. LEASE, EXPLANATION AND SERIAL NO.
NM- 7488
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 ☐ GAS WELL ☐ OTHER ☒ **DRILLING**

2. NAME OF OPERATOR
Amoco Production Company

3. ADDRESS OF OPERATOR
BOX 68, HOBBS, N. M. 88240

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.)

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
MYERS "B" Federal

9. WELL NO.
25

10. FIELD AND POOL, OR WILDCAT
LANGUE MATIX

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
21-24-37 N14PM

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	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input checked="" type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input checked="" type="checkbox"/>
(Other) Spudding	<input checked="" type="checkbox"/>		

(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.)*

**Cactus Drilling Co. spudded 12 1/4" hole 9: AM 8-27-72.
On 8-28-72 8 5/8" OD 24" H-40 Casing was set @ 365' w/ 2252.
Cement Circulated. After WOC 18 hours. Tested casing
w/ 1500 psi for 30 min. Test O.K.
Reduced hole to 7 7/8" @ 365 and resumed drilling.**

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

SIGNED

TITLE **AREA SUPERINTENDENT**

DATE **AUG 31 1972**

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

SEP 1 1972

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

*See Instructions on Reverse Side

24- USGS- H
1- DIV
1- 345P
1- RRI

RECEIVED

SEP 18 1972

OIL CONSERVATION COMM.
HOBBS, N. M.