

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42 R1424.
LEASE DESIGNATION AND SERIAL NO.

LC-060579

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

2. NAME OF OPERATOR
Amoco Production Company

3. ADDRESS OF OPERATOR
P. O. Drawer A, Levelland, TX 79336

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
680' FNL X 808' FEL Sec 22 (NE/4 NE/4 Unit A)

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3229.2 GR

7. UNIT AGREEMENT NAME
South Mattix Unit

8. FARM OR LEASE NAME
South Mattix Unit

9. WELL NO.
28

10. FIELD AND POOL, OR WILDCAT
Fowler Upper Yeso

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
22-24-37 NMPM

12. COUNTY OR PARISH
Lea

13. STATE
NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>set casing</u>	<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.)*

Continued drilling to TD of 5745'. Reached TD 9/25/77. Ran logs and evaluated. Ran 5½" casing and set at 5745: Cement with 800 SX LO Dense and 350 SX Class C cement. Plug down at 7:50 A.M. 9/28/77. Did not circulate. Ran temperature survey and found top of cement at 1080'. Released rig 9/28/77.

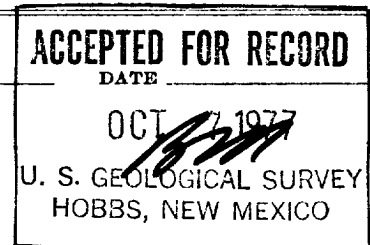
18. I hereby certify that the foregoing is true and correct

SIGNED Randy Atkins TITLE Staff Assistant (SG) DATE 10-5-77

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:



*See Instructions on Reverse Side