

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☐ gas ☒ 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. See space 17 below.)
AT SURFACE: 1980' FSL & 1980' FWL, Sec 9
AT TOP PROD. INTERVAL: (Unit K, NE/4 SW/4)
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☒
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

☐
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MAY 7 1979

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

5. LEASE

14212

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Langlie C Federal

9. WELL NO.

2

10. FIELD OR WILDCAT NAME

Jalmat Yates Seven Rivers

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

9-25-37

12. COUNTY OR PARISH

Lea

13. STATE

NM

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

3149.8 GR

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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.)*

Propose to establish a Jalmat Yates gas well. Well is presently completed in the Langlie Mattix Queen where attempts to establish Queen production have been unsuccessful.

Plug off Queen perfs by setting a CIBP at approximately 3370' and cap with 35' cement. Perforate Yates intervals 2982-2987', 2996-3022', 3066-3096', 3105-3124' using 2 JSPF. Acidize perfs with 5,000 gals. 7-1/2% MSR-150 acid. Fracture formation with 33,000 gals. Ezefrac 60 J347 plus 16,500# 20/40 sand plus 12,000# 10/20 sand. Flush and test well.

Subsurface Safety Valve: Manu. and Type

Set @ Ft.

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

SIGNED

Ray Cox

TITLE

Admin. Supervisor

DATE

5-3-79

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

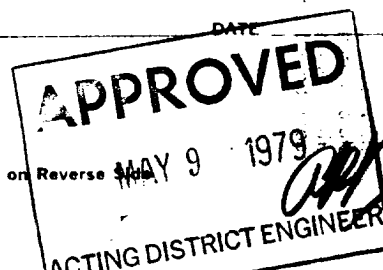
0+4 - USGS, H

1 - Hou

1 - RWA

1 - Susp.

*See Instructions on Reverse



U.S. DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
DENVER, COLORADO

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OIL CONSERVATION COMM.
HOUSTON, TEXAS