

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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	7. If Unit or CA, Agreement Designation South Mattix Unit Federal
2. Name of Operator Amoco Production Company	8. Well Name and No. South Mattix Unit Federal #34
3. Address and Telephone No. P. O. Box 3092, Houston, TX 77253	9. API Well No. 30-025-26096
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1650' FNL X 2310' FWL; Sec. 22, Twnship 24-S, Range 37-E	10. Field and Pool, or Exploratory Area Fowler, Upper Yeso
	11. County or Parish, State Lea

12. 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"/> Change of Plans
<input 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 <u>Temporarily abandon</u>	<input type="checkbox"/> 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.)*

NOTIFY BLM AT (505) 393-3612 PRIOR TO TESTING THE CASING.

MI X RUSU

POH and lay down production equip.

Set CIBP @ 5265'

Pressure test to 500 lb/sq in w/pressure drop less than 10% for 30 min. If test okay, load hole w/pkr fluid & RDSU. REQUEST T.A. APPROVAL FROM BLM.

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

Signed <u>Kim J. Gilman</u>	Title <u>Asst. Admin. Analyst</u>	Date <u>10/29/91</u>
(This space for Federal or State office use)		

Approved by _____	Title _____	Date <u>11-18-91</u>
Conditions of approval, if any:		

THIS IS NOT T.A. APPROVAL

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.