

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 ☐ well gas ☒ well other ☐
2. NAME OF OPERATOR
Amoco Production Company
3. ADDRESS OF OPERATOR
P. O. Box 68, Hobbs, NM 88240
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 990' FNL X 2310' FEL, Sec. 22
AT TOP PROD. INTERVAL: (Unit B, NW/4, NE/4)
AT TOTAL DEPTH:
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

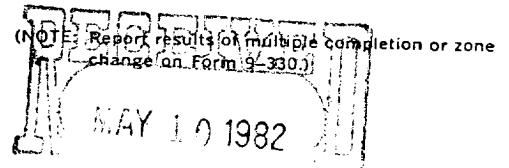
- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

- ☐
☐
☐
☐
☐
☐
☐
☐
☐
☐

Current status **TA**

5. LEASE
LC-032450-A
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
South Mattix Unit Federal
8. FARM OR LEASE NAME
South Mattix Unit Federal
9. WELL NO.
36
10. FIELD OR WILDCAT NAME
Fowler Upper Paddock
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
22-24-37
12. COUNTY OR PARISH
Lea
13. STATE
NM
14. API NO.
15. ELEVATIONS (SHOW DF, KDB, AND WD)
3253.1 GR



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.)*

The well is currently not capable of producing in paying quantities. The well was shut in 1-1-81. Our engineering staff is currently evaluating the possibilities of recompleting this well to another horizon. The date the well will be recompleted is unknown.

0+6-USGS, H 1-DMF

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Mark Freeman TITLE Ast. Adm. Analyst DATE 4-28-82

APPROVED (This space for Federal or State office use)
(Orig. Sgd.) PETER W. CHSTER

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

JUN 7 1982
FOR
JAMES A. GILLHAM
DISTRICT SUPERVISOR

APPROVED FOR 12 MONTH PERIOD
ENDING JUN 7 1983

*See Instructions on Reverse Side