

Form 9-331
Dec. 1973Form Approved.
Budget Bureau No. 42-R1424UNITED 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 ☐
well well

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.)

990' FNL & 2310' FEL, Sec. 22

AT SURFACE:

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:

☐☐☒☐☐☐☐☐OCT 22 1979
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

5. LEASE

LC-032450-a

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

South Mattix Unit Fed.

8. FARM OR LEASE NAME

South Mattix Unit Fed.

9. WELL NO.

36

10. FIELD OR WILDCAT NAME

Fowler Drinkard

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

22-24-37

12. COUNTY OR PARISH 13. STATE

Lea

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.)*

Moved in Completion Unit 10-1-79. Perforated 6260'-72', 6283'-88', 6303'-18', 6322'-28' with 2 JSPF. Ran tubing, packer, and tailpipe. Packer set at 6180'. Acidized with 5500 gal 15% NE acid. Flushed to perfs with clean water. Swab tested 2 days. Currently pump testing.

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

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

SIGNED Bob Davis TITLE Asst. Sec. Admin. And DATE 10-18-79APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

0+4 USGS-H, 1-Hou, 1-Susp, 1-BD, 1-4-100, 1-Chevron, 1-Tenneco, 1-Conoco