Form 9-331 Dec. 1973

Form A	Approved	i.	
Budget	Bureau	No.	42-R1424

UNITED STATES	Dudget Buleau No. 42-R1424		
	5. LEASE		
DEPARTMENT OF THE INTERIOR	NM-13426		
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME		
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME		
(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.)	8. FARM OR LEASE NAME		
1. oil gas other	Federal CG 9. WELL NO.		
2. NAME OF OPERATOR	1		
Amoco Production Company	10. FIELD OR WILDCAT NAME		
3. ADDRESS OF OPERATOR	Wildcat Delaware		
P. O. Box 68, Hobbs, NM 88240	11. SEC., T., R., M., OR BLK. AND SURVEY OR		
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 6601 ESI \$ 10001 ESI \$ 200	AREA		
AT SURFACE: (Up i + 0 SU/4 SE /4)	28-25-34 12. COUNTY OR PARISH 13. STATE		
AT TOP PROD. INTERVAL: (Unit 0, SW/4, SE/4)	Lea NM		
AT TOTAL DEPTH:	14. API NO.		
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	30-025-27353		
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)		
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	3353.6 GL		
TEST WATER SHUT-OFF			
FRACTURE TREAT			
SHOOT OR ACIDIZE			
REPAIR WELL	(NOTE: Report results of multiple completion or zone		
MULTIPLE COMPLETE	change on Form 9–330.)		
CHANGE ZONES	MAY 21 1981		
ABANDON* [X] (other)			
(onor)	U.S. GEGLOOM AND ANY HOBBS, TAKEN AND ANY		
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dimeasured and true vertical depths for all markers and zones pertinen Plugged well per the following (verbal approx	rectionally drilled, give subsurface locations and t to this work.)*		
ragged were per the fortowing (verbal approv	al by reter thester):		
Set a 100' Class C cement plug (30 sacks) fro	om 5340-5240'.		
Set a 100' Class C cement plug (45 sacks) fro	om 850-750'.		
Set a 35' Class C cement surface plug (10 sac	ks).		
Installed P X A marker.			
0+4-USGS, H 1-Hou 1-Susp 1-LBG	1-W. Stafford, Hou		
Subsurface Safety Valve: Manu. and Type	Set @		
18. I hereby certify that the foregoing is true and correct	Set @Ft.		
K . I . \mathcal{Y}	cv+ F 10 01		
SIGNED PENTON Green TITLE AST. Adm. Anal			
(This space for Federal or State office			
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	DATE		
ANI.	APPROVED		
*See Instructions on Reverse Si	JAMES A. CILHAM DISTRICT SUPERVISOR		