

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPL
(Other instructions
verse side)TE*
re-Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

NM-0321613

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME SOUTH MATIX UNIT FED
2. NAME OF OPERATOR Amoco Production Company	8. FARM OR LEASE NAME
3. ADDRESS OF OPERATOR BOX 68, HOBBS, N. M. 88240	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL x 1980' FEL Sec. 15 (UNIT J, NW 1/4 SE 1/4)	10. FIELD AND POOL, OR WILDCAT FOWLER ELLEN.
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3255' R. D. B.
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 15-24-37 NMPM
	12. COUNTY OR PARISH LEA
	13. STATE N.M.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)

Downhole dual completion equipment precludes successful + economical repair well operations. Propose to Abandon Fowler Upper Yess (perfs 5413-5653') w/ 100sf cement. Drill + Cleanout to TD 9705. Fowler Ellenburger zone to be acidized w/ 2000 gal 15% NE containing SP181 scale inhibitor. Swab, Evaluate and restore to production.

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

SIGNED

TITLE ADMINISTRATIVE ASSISTANT

DATE JUL 16 1974

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
JUL 23 1974

*See Instructions on Reverse Side

ARTHUR R. BROWN
DISTRICT ENGINEER044-USGS-4
1-DIV
1-SUSD
1-RRY
1-ARCO
1-COCONO
1-CHEVRON
1-TENNECO