Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE (Other instructions on reverse side)

COPY TO O.C.C.
Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.
LC-032450(A)
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 [X] GAS WELL [ ] OTHER

7. UNIT AGREEMENT NAME
SOUTH MONUMENT 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.
2

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
660' FSL x 1980' FWL Sec. 15 (Unit N, SE/4 SW/4)

10. FIELD AND POOL, OR WILDCAT
FOWLER-UPPER YESO

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
15-24-37 NMPM

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3276' DF

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:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	[ ]	PULL OR ALTER CASING	[ ]	WATER SHUT-OFF	[ ]	REPAIRING WELL	[X]
FRACTURE TREAT	[ ]	MULTIPLE COMPLETE	[ ]	FRACTURE TREATMENT	[ ]	ALTERING CASING	[ ]
SHOOT OR ACIDIZE	[ ]	ABANDON*	[ ]	SHOOTING OR ACIDIZING	[ ]	ABANDONMENT*	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other)			[ ]
(Other)			[ ]				

(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.)*

In an effort to increase productivity I well proceeded work performed as follows:
Perforated 7" @ 5148 w/4 JS and squeezed with 150 Sx. Incr mat. Cleaned out to PBD 5758. Perforated intervals 5172, 85, 92-96, 5203, 15, 29, 39-41, 61-70, 79, 89, 97, 5310, 14, 25, 35, 44, 53, 64, & 76 w/ 2 JSPF. Fraced in 3 stages w/ 45000 gal gel brine + 54000# sand + 1250 gal 15% NE. Evaluated and restored to production.

Prior - Pmp 8 BO + 1 BW 24 hrs. GOR 11550.
After - Flwd 38" + 0" 24 hrs. GOR 10850.

TD - 10305'
PBD - 5720'
7" @ 5148' w/ 350 Sx.

OC - 9-27-71
Comp. 10-15-71

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

SIGNED _____ TITLE AREA SUPERINTENDENT DATE OCT 18

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side