

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)Form approved.  
Budget Bureau No. 42-R1424.  
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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME SOUTH MATTHEW UNIT FED.
2. NAME OF OPERATOR AMOCO PRODUCTION COMPANY	8. FARM OR LEASE NAME
3. ADDRESS OF OPERATOR BOX 367, ANDREWS, TEXAS 79714	9. WELL NO. 6
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL x 660' FWL SEC 15 (UNIT 1, NW 1/4 SW 1/4)	10. FIELD AND POOL, OR WILDCAT FOWLER-UPPER YESO
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3282' 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

☐  
☐  
☐  
☐  
☐

PULL OR ALTER CASING

☐  
☐  
☐  
☐  
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

## 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.)\*

Restarted well to production by cleaning out  
scale and acidizing perf 5182-5701 w/  
657 gal L-45 x 3000 gal 15% L-37.  
Evaluated: restarted to prod.

Pump 89 BO + 331 BW 24 HRS.

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

SIGNED

*Loy L. Yorkum*

TITLE

ADMINISTRATIVE ASSISTANT

DATE

FEB 26 1975

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

\*See Instructions on Reverse Side

ACCEPTED FOR RECORD

MAR 3 1975

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

RECEIVED

MAR 4 1975  
OIL CONSERVATION COMM.  
HOES, N. M.