

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

COPY TO O.C.C.  
SUBMIT IN TRIPPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.  
LEASE DESIGNATION AND SERIAL NO.

LC-032450(b)

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 Mattix Unit
2. NAME OF OPERATOR Amoco Production Company		8. FARM OR LEASE NAME South Mattix Unit <i>Ad</i>
3. ADDRESS OF OPERATOR P. O. Drawer A, Levelland, Texas 79336		9. WELL NO. 7
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FNL x 660' FWL Sec 15, T-24-S, R-37-E (Unit D NW/4, NW/4)		10. FIELD AND POOL, OR WILDCAT Fowler Upper Yeso
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 15-24-37 NMPM
15. ELEVATIONS (Show whether DF, RT, GK, etc.)		12. COUNTY OR PARISH 13. STATE

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input checked="" type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) Clean Scale from Wellbore <input checked="" type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(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.)\*

Propose to increase production by removing scale buildup in tubing and wellbore. Pump is presently stuck in tubing. Propose to pull rods and pump. Acidize down tubing with 2000 gals. 15% non-emulsifying acid. Spot 700 gals acid across perfs and washand soak. Acidize perfs w/1300 gals and flush w/fresh water. Treat annulus with 110 gals Wellaid 828 mixed with 150 barrels fresh water. Return well to production.

Approval to commence work received 10/12/77 from Mr. A.R. Brown to Ray Cox.

RECEIVED  
OCT 19 1977

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

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

SIGNED Ray W. Cox TITLE Administrative Assistant DATE 12/18/77

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

044-USGS-H  
1-Div.  
1-Susa.  
1-RC  
1-Conoco  
1-Areo  
1-Tenneco  
1-Std. Oil of Tex.

\*See Instructions on Reverse Side

APPROVED  
OCT 19 1977  
ARTHUR R. BROWN  
DIRECTOR