

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE  
(Other instructions  
verse side)

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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Amoco Production Company

3. ADDRESS OF OPERATOR

BOX 68, HOBBS, N. M. 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)

At surface

660' FSL x 660' FEL Sec. 15 (UNIT P, SE 1/4 SE 1/4)

7. UNIT AGREEMENT NAME

SOUTH MATTIX UNIT FED.

8. FARM OR LEASE NAME

9. WELL NO.

8

10. FIELD AND POOL, OR WILDCAT

FOWLER ELLENBURGER

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

15-24-37 NMPM

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, OR, etc.)

3247' R. D. B.

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.)\*

In an effort to increase productivity,  
propose remedial work as follows:

Drill out cement & CI retainers @ 9785' & 9810'.

Set CI Retainer @ 9908' and cap w/ cement.

Acidize perforations 9706-50, 9836-79' w/ 2000  
gal 15% NE. Evaluate & restore to production.

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

SIGNED

*Loy L. Yorkum*

TITLE ADMINISTRATIVE ASSISTANT

DATE

JUN 13 1974

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED  
JUN 13 1974  
ARTHUR R. BROWN  
DISTRICT ENGINEER

DATE

\*See Instructions on Reverse Side

0+4 USGS-H  
1-DIV  
1-SUP  
1-RRV  
1-GRW  
1-COROL  
1-SPD DFLW  
1-RENNER