

N. M. OIL CONS. COMMISSION  
P. O. BOX 1980  
HOBBS, NEW MEXICO 88240

Form 9-331  
Dec. 1973

Form Approved.  
Budget Bureau No. 42-R1424

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well <input checked="" type="checkbox"/> gas well <input type="checkbox"/> other <input type="checkbox"/>	5. LEASE LC-032450 (b)
2. NAME OF OPERATOR Amoco Production Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 68, Hobbs, NM 88240	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 710' FNL X 1230' FWL, Unit C AT TOP PROD. INTERVAL: Sec. 15, T-24-S, R-37-E AT TOTAL DEPTH:	8. FARM OR LEASE NAME South Mattix Unit Federal
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	9. WELL NO. 22
REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF <input type="checkbox"/> FRACTURE TREAT <input type="checkbox"/> SHOOT OR ACIDIZE <input type="checkbox"/> REPAIR WELL <input checked="" type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETE <input type="checkbox"/> CHANGE ZONES <input type="checkbox"/> ABANDON* <input type="checkbox"/> (other) <input type="checkbox"/>	10. FIELD OR WILDCAT NAME Fowler Upper Yeso
SUBSEQUENT REPORT OF: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 15-24-37
	12. COUNTY OR PARISH Lea
	13. STATE NM
	14. API NO.
	15. ELEVATIONS (SHOW DF, KDB, AND WD) 3251' GL

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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ROSWELL, NEW MEXICO

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 squeeze Upper Yeso gross perforated interval 5169'-5662'. Pump 2 drums of Unichem's Techni-Hib 793 mixed w/20 bbls. fresh water and 5 gals. Unichem's Techni-Clean 120. Pump at less than 1 BPM. Flush w/140 bbls. fresh water containing 5 gals. Unichem Techni-Break 100. Shut well in.

0+4-USGS, R 1-Hou 1-Susp 1-CLF

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Cathy L. Sorman TITLE Ast. Adm. Analyst DATE 10-19-81

(This space for Federal or State office use)

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

APPROVED

OCT 30 1981

JAMES A. GILLHAM  
DISTRICT SUPERVISOR