

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE
(Other Instructions on
reverse side)

Form approved,
Bureau of Land Management, No. 42-R1424.
5. LEASE IDENTIFICATION AND SERIAL NO.
LC-032400-12
6. IF INDIAN, ADOBE, 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 DRILLING	7. UNIT AGREEMENT NAME BUTHMATTIX UNIT FEDERAL
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. 26
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' FSL Sec. 15 (Unit M, SW 1/4 SW 1/4)	10. FIELD AND POOL NAME FOWLER-UPPER Y-60
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 15-24-37 NMPM
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	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 COMPLETION ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☒

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☒

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.)*

Capitan Drilg. Co. spudded 12 1/4" hole 12:30 PM 9-17-73.
On 9/19/73 8 5/8" OD 24" 8R K-55 Casing was set @ 1060'
w/6500# Incon 4% Gel + 100# Incon neat. Cement line.
after WOC 18 hrs, tested casing w/ 1400psi for 30 min.
Test O.K.
Reduced hole to 7 7/8" @ 1060' & resumed drilling.

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

SIGNED

TITLE

ADMINISTRATIVE ASSISTANT

DATE

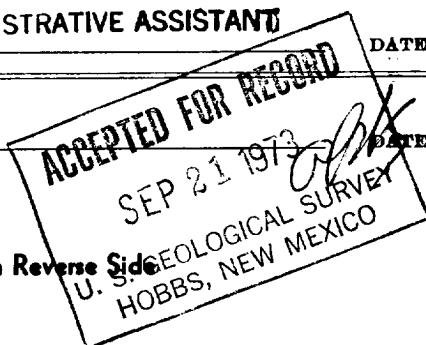
9-21-73

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:



*See Instructions on Reverse Side

014- USGS-H
1-DIV
1-SUB P
1-RRV
1-ARCO
1-CONOCO
1-CHEVRON
1-TENNECO