

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE  
(Other instructions on re-  
verse side)

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

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
2. NAME OF OPERATOR Amoco Production Company		7. UNIT AGREEMENT NAME
3. ADDRESS OF OPERATOR P. O. Drawer A, Levelland, Texas 79336		8. FARM OR LEASE NAME Myers B Federal
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 660' FNL X 810' FWL (Unit D, Sec. 15)		9. WELL NO. 28
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT Langlie Mattix Queen
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3269.7 RDB		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 15-24-37
		12. COUNTY OR PARISH Lea
		13. STATE NM

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) Completion ☒

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.)\*

Acidize existing perfs with 3,500 Gal 15% ES-30 acid. Fracture down casing with 40,000 Gal Titan 2 + 10,000 Gas CO<sub>2</sub> + 60,875# sand. Flush casing. Swab and test well. Released service unit 12-22-77.

Completed well 12-24-77 as a flowing gas well with a potential of 0 BO + 0 BW + 912 MCF gas in 24 hrs. FTP - 45# on 48/64" choke.

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

SIGNED Randy Atkins

TITLE Staff Assistant (SG)

DATE 12-30-77

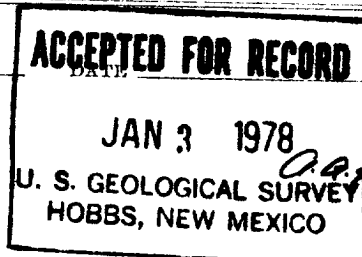
(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

0 + 4 USGS, H  
1 DIV  
1 RC  
1 SUSP

\*See Instructions on Reverse Side



RECEIVED

JAN 10 1978

OIL CONSERVATION COMM.  
HOBBS, N. M.

ACCEPTED FOR RECORD