

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Form approved,
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-032450 (b)

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

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR
Amoco Production Company

8. FARM OR LEASE NAME

Myers B Federal

3. ADDRESS OF OPERATOR
P. O. Drawer A, Levelland, Texas 79336

9. WELL NO.

29

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

10. FIELD AND POOL, OR WILDCAT

Langlie Mattix Queen

1980' FSL X 1830' FWL (Unit K, Sec.15)

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

15-24-37

14. PERMIT NO.

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

3250.2 GR

12. COUNTY OR PARISH

Lea

13. STATE

NM

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*

COMPLETION

(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.)*

Released service unit 1/12/78. Completed well 1/12/78 as a flowing gas well with a potential of 0 BW x 0 BC x 515 MCF in 24 hours. SITP 300#. CPC 275#. TPF-80# on 30/64" choke.

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

SIGNED Randy Atkins

TITLE Assistant Admin. Analyst DATE 1-20-78

(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

ACCEPTED FOR RECORD

JAN 23 1978

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO