

Form 9-331
Dec. 1973Form Approved.
Budget Bureau No. 42-R1424UNITED 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 ☐ gas well ☒ other Dual2. NAME OF OPERATOR
Amoco Production Company3. ADDRESS OF OPERATOR
P. O. Box 68, Hobbs, NM 882404. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
~~1960~~ FNL & 1650' FWL, Sec. 15
AT SURFACE: ~~1650~~ (Unit F, SE/4, SW/4)
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) Squeeze☐
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OCT 5 1979

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

U. S. GEOLOGICAL SURVEY
HOBBS, 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.)*

Set cement retainer at 5888'. Squeezed perfs 5944'-5997' with 150 sx Class H cement. Reversed out 4 sx. Drilled cement retainer and cement to 5998'. Tested casing with 800# for 30 min. OK. Ran retrievable bridge plug set at 5000'. Capped with 10' sand. Perforated 4846'-4853', 4865'-4874', 4883'-4890', 4892'-4901' with 2 JSPF. Ran tubing, packer, and tailpipe. Packer set at 4688'. Tailpipe set at 4755'. Acidized with 5500 gal 15% NE acid. Ball sealer gun failed. Re-acidized with 5500 gal 15% NE acid. Flowed well to clean up. Ran 2-3/8" tubing, seating nipple, seal assembly, 1.87 profile nipple, and packer set at 4809, latch into Model D packer at 6202. Ran Second string 2-3/8" tubing with seating nipple. Latched into A-5 packer. Tested casing with 500#. OK. Installed pump equipment on Paddock and Drinkard. Currently pump testing both zones.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Ray Cox TITLE Admin. Supervisor DATE 10-2-79

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

0+4- USGS-H, 1- Susp, 1-Hou, 1- BD

