

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 gas ☒ well other ☐

2. NAME OF OPERATOR

Amoco Production Company

3. ADDRESS OF OPERATOR

P. O. Box 68 Hobbs, NM 88240

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 330' FSL & 420' FWL, Sec. 9

AT TOP PROD. INTERVAL: (Unit M, SW/4, SW/4)

AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) Propose to dual complete

SUBSEQUENT REPORT OF:

RECEIVED

JAN 23 1981

U.S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

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

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 dual complete well in the Queen and Yates per the following:

Go in hole with 2-3/8" tubing, Guiberson Uni-VI packer with an of-off tool, and five joints of tailpipe. Place a sliding sleeve one joint above the on-off tool and a 1-25/32" seating nipple one joint above sliding sleeve. Set packer at approx. 3200'. Tailpipe will be at approx. 3350'. Swab Yates perforations 2776'-2942' until production is started. Close sliding sleeve by wireline. Swab well to place Queen perforations 3292'-3386' on production. Queen production will be through the 2-3/8" tubing. Yates production will be through annulus between 2-3/8" tubing and 7" casing. Install surface equipment.

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

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

SIGNED Benton Greer TITLE Ast. Adm. Analyst DATE 1-21-81

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

0+4-USGS, H 1-Hou 1-Susp 1-LBG 1-W. Stafford, Hou