

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

| | |
|---|--|
| 1 Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other | 5. Lease Designation and Serial No. SF-078502 |
| 2 Name of Operator Amoco Production Company ATTN: J.L. HAMPTON | 6 If Indian, Allottee or Tribe Name |
| 3 Address and Telephone No. P. O. Box 800 Denver, Colorado 80201 | 7 If Unit or CA, Agreement Designation |
| 4 Location of Well (Footage, Sec., T., R., M., or Survey Description) 1580' FNL, 1450' FEL SW/NE Sec. 11, T29N, R8W | 8 Well Name and No. Vandewart "A" #12 |
| | 9. API Well No. 30-045-28025 |
| | 10 Field and Pool, or Exploratory Area Basin Fruitland Coal Gas |
| | 11 County or Parish, State San Juan, NM |

| 12 CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA | | |
|---|--|---|
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment | <input checked="" type="checkbox"/> Change of Plans |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Recompletion | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Plugging Back | <input type="checkbox"/> Non-Routine Fracturing |
| | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> Water Shut-Off |
| | <input type="checkbox"/> Altering Casing | <input type="checkbox"/> Conversion to Injection |
| | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Dispose Water |
| | | (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) |

13 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.)*

Amoco Production Company intends to dual complete the subject well as a Fruitland Coal Picture Cliffs well. (Revised from previous Fruitland Coal completion only.)

See the attached drilling program showing geological markers, and revision to the casing program from 8 5/8" casing to 9 5/8" casing.

Please contact Cindy Burton (303)830-5119 if you have any questions.

| | | |
|---|--|---|
| 14. I hereby certify that the foregoing is true and correct | | |
| Signed <u>J.L. Hampton</u> | Title <u>Sr. Staff Admin. Supervisor</u> | Date <u>9/27/91</u> |
| (This space for Federal or State office use) | | |
| Approved by _____ | Title _____ | APPROVED <u>10/18/1991</u> AREA MANAGER |
| Conditions of approval, if any: <u>12/1/91</u> | | |

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.