

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-1135
Expires September 30, 1990

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

5. Lease Designation and Serial No.
Jicarilla Tribal 358

6. If Indian, Allottee or Tribe Name

Jicarilla Apache

7. If Unit or C.A. Agreement Designation

8. Well Name and No.

Jicarilla Tribal 358 #6

9. API Well No.

30-043-20104

10. Field and Pool, or Exploratory Area

Ballard Pictured Cliffs

11. County or Parish, State

Sandoval, New Mexico

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Amoco Production Company

Attn: John Hampton

3. Address and Telephone No.

P.O. Box 800, Denver, Colorado 80201

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1830' FNL x 1490' FEL, Sec. 6-22N-2W

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection

Status

(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 requests approval for long-term shut-in on the Jicarilla Tribal Lease 358 wells no. 1,3,6,8,9 for a period of 6 months. At this time these wells are being offered for divestment, but should they not be divested Amoco will proceed with negotiation for installation of a Central Point of Delivery.

Compression tests have been done on the following wells:

#3 15 mcf/d to 135 mcf/d
#5 12 mcf/d to 100 mcf/d

RECEIVED

OCT 29 1990

OIL CON. DIV.
DIST. 9

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

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

Signed John Hampton

Title Sr. Staff Admin. Supv.

Date 10/23/90

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Ken Townsend

Date

NMOGD