

(November 1983)  
(Formerly 9-331)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Expires August 31, 1985

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. Jicarilla Contract 155	
2. NAME OF OPERATOR Amoco Production Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache	
3. ADDRESS OF OPERATOR 501 Airport Drive, Farmington, NM 87401		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1940' FSL x 725' FWL		8. F. OR LEASE NAME Jicarilla Contract 155	
14. PERMIT NO.		9. WELL NO. 35	
15. ELEVATIONS (Show whether OF, RT, GR, etc.) 6624' GR		10. FIELD AND POOL, OR WILDCAT Blanco Mesaverde	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NW/SW Section 30, T26N, R5W		12. COUNTY OR PARISH Rio Arriba	
13. STATE NM			

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other) completion	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>

(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.) \*

Moved in and rigged up service unit on 8/28/84. Total depth of the well is 5423' and plugback depth is 5378'. Pressure tested production casing to 3800 PSI. Perforated the following intervals: 5316'-5308', 5280'-5270', 5262'-5252', 5248'-5240', 5234'-5226', 5192'-5171', 5171'-5160', 5150'-5138', 2 jsp, .59" in diameter, for a total of 176 holes. Fraced interval 5316'-5138' with 90,000 gals. of 20# gelled water containing 2% KCL, 1 gal surfactant per 1000 gals. of fluid and 115,000# of 20-40 sand and 10,000# of 20-40 resin-coated sand.

Landed 2-3/8" tubing at 5327' and released the rig on 9/6/84.

RECEIVED  
OCT 15 1984  
OIL CON. DIV.  
DIST. 3

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

SIGNED B. D. Shaw TITLE Administrative Supervisor DATE 9/28/84

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE OCT 11 1984  
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

FARMINGTON RESOURCE AREA

BY smm

\*See Instructions on Reverse Side  
NMOCC

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.