

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Budget Bureau No. 1004-0135
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. ☐ OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Amoco Production Co.

3. ADDRESS OF OPERATOR

501 Airport Drive, Farmington, N M 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any BLM requirements.
See also space 17 below.)
At surface

1980' FNL x 510' FEL

RECEIVED

AUG 08 1985

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

5702' GL

5. LEASE DESIGNATION AND SERIAL NO.

14-20-603-5034

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo Tribe

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo Tribal "U"

9. WELL NO.

25

10. FIELD AND POOL, OR WILDCAT

Tocito Dome Penn "D"

11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA

SE/NE Sec22, T26N, R18W

12. COUNTY OR PARISH

San Juan

13. STATE

NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) PxA Status

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

X

(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.)*

Per the recommendation of Mark Philbber of your office, the above referenced PxA well was pressure tested on 7-3-85. The results were as follows:

1st Test

10:30 Pressure PxA Marker to 500 psi
10:33=400 psi
10:40=300 psi
10:45=260 psi
10:50=260 psi
11:00=235 psi

2nd Test

11:02 = 540 psi
11:07 = 460 psi
11:12 = 415 psi
11:22 = 375 psi
11:32 = 355 psi

~~Due to the low pressures and volume of fluid, we recommend monitoring the well every 6 months.~~

RECEIVED
AUG 14 1985

OIL CON. DIV.

DIST. 2
8-6-85

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

SIGNED

BDS Shaw

TITLE

Adm. Supervisor

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE AUG 13 1985

FARMINGTON RESOURCE AREA

BY *Sm*

*See Instructions on Reverse Side

NMOCC