UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

9–331 1973	Form Approved. Budget Bureau No. 42 –R1424
UNITED STATES	5. LEASE
DEPARTMENT OF THE INTERIOR	SF 077329
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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.)	7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME
1. oil gas well other	Martin Gas Com "C" 9. WELL NO.
2. NAME OF OPERATOR	1E
AMOCO PRODUCTION COMPANY	10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Basin Dakota
501 Airport Drive, Farmington, NM 87401	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	AREA SW/4 SE/4 Section 11, T27N, R10W
AT SURFACE: 860' FSL x 1845' FEL AT TOP PROD. INTERVAL: same	12. COUNTY OR PARISH 13. STATE San Juan New Mexico
	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	30-045-24478
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD) 6043 GL
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	
REPAIR WELL	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	change on Form 9–330.)
MULTIPLE COMPLETE	그 그 그 그 그 이 사람들이 그렇게 되었다.
ABANDON*	
(other) correction of previous spud x set set casing sundry	

set casing sundry 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.)*

The estimated cement top for the second stage cementing procedure for the $5\ 1/2$ inch production casing is 1290. This is in reply to your letter dated March 18, 1981.



Subsurface Safety Valve: Manu. and Type 18. I hereby certify that the foregoing is true and correct Original Staned By _ TITLE Dist. Admin. Supvr DATE 4/1/81 SIGNED ______________________ (This space for Federal or State office use)

CONDITIONS OF APPROVAL, IF ANY:

_ DATE

*See Instructions on Reverse Side

APR 03 1981

NOVERTLE FOR RECORD

NMOCC

FARMINGTON DISTRICT