## UNITED STATES DEPARTMENT OF THE INTERIOR CEOLOGICAL SURVEY

SF-0	773	83	-		

5. ŁÉASE

5. IF INDIAN, ALLOTTEE OR TRIBE NAM
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GEOLOGICAL SORVET		
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME	
reservoir. Use Form 9–331–C for such proposals )	8. FARM OR LEASE NAME	
1. oil gas (X)	J. C. Davidson	
1. oil gas X other	9. WELL NO.	
2. NAME OF OPERATOR	1	
Amoco Production Company	10. FIELD OR WILDCAT NAME	
3. ADDRESS OF OPERATOR	Fulcher Kutz Pictured Cliffs	
501 Airport Dr., Farmington, NM 87401	11. SEC., T., R., M., OR BLK. AND SURVEY OR	
4. LOCATION OF WELL (REPORT LOCATION CLEARLY, See space 17	AREA NW/NW, Section 28,	
below.)	T28N, R10W	
AT SURFACE: 990' FNL x 990' FWL	12. COUNTY OR PARISH 13. STATE	
AT TOP PROD. INTERVAL: Same AT TOTAL DEPTH: Same	San Juan NM	
Salle	14. API NO.	
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	30-045-07126	
REPORT, OR OTHER DATA	ELEVATIONS (SHOW DF, KDB, AND WD)	
REPORT, OR OTHER DATA  REQUEST FOR APPROVAL TO:  TEST WATER SHUT-OFF  FRACTURE TREAT SHOOT OR ACIDIZE  SUBSEQUENT REPORT  SUBSEQUENT REPORT  SUBSEQUENT REPORT  SHOOT OR ACIDIZE	6149' DF	
TEST WATER SHUT-OFF	` ^ <b>\</b>	
FRACTURE TREAT	1983	
TEST WATER SHUT-OFF SHOOT OR ACIDIZE REPAIR WELL MAY 17	CICAL N. Mchange on Form 9-330.)	
REPAIR WELL MAN	(NOTEX Report resists dimension becompletion by zone	
PULL OR ALTER CASING U U MULTIPLE COMPLETE	GICAL W. Wichange of Louin 3-330.)	
CHANGE ZONES	370 113 4 1983	
ABANDON*	S 201 1 1 1	
(other) Install Compressor	ALCON. DIV.	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is a	te all pertinent details, and give pertinent dates, directionally drilled, give subsurface locations and	
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 permission to install compression facilities on BLM administered lands in the NW/4, Section 28, T28N, R10W, N.M.P.M., San Juan County, NM. This compressor will be used as a well depletion unit for the J. C. Davidson No. 1 and 2. Please find attached description of compressor site. Verbal approval has been received by David Schott, Amoco Production Co. from Jack Speer, BLM, to begin dirtwork and installation May 4, 1983. Archealogical surveys have been made and their report will be sent to your office. A survey plat for the compressor site has been prepared and will be sent to your office as soon as it is signed by Amoco's attorney-in fact in Denver, CO.

Subsurface	Safety Valve: Manu. and Type		Set @	Ft.
18. I hereb	oy certify that the foregoing is true Cristian is alread By a second control of the control of t	e and correct  TITLE Dist. Admin. Supvra	τε 5-10-83	
		Indispute for Federal or State office use)		
APPROVED	B.Y	TIT E	DATE	

"See Instructions on Reverse Side

DESCRIPTION OF COMPRESSOR SITE:

Beginning at a Point that is S35°06'E, 1198.12' from the Northwest Corner of Section 28, Township 28 North, Range 10 West N.M.P.M. San Juan County, New Mexico:

Thence NO1°05'E 25';

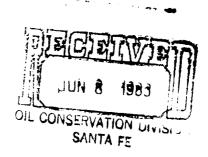
thence N890551W 251;

thence S01°05'W 25'; to the point of beginning thence S89°55'E 25' to the point of beginning

Contains O.Oll: Acres more or less



OIL CON. DIV. DIST. 3



## UNITED STATES

## DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

SUNDRY	NOTICES	AND	REPORTS	ON	WFIIS
		11110	INEL OILLO	011	AAELLO

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  $\rangle$ 8. FARM OR LEASE NAME J. C. Davidson gas well  $\sqcup$ well other 9. WELL NO. 2. NAME OF OPERATOR Amoco Production Company 10. FIELD OR WILDCAT NAME 3. ADDRESS OF OPERATOR Fulcher Kutz Pictured Cliffs 501 Airport Dr., Farmington, NM 11. SEC., T., R., M., OR BLK. AND SURVEY OR 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 AREA NW/NW, Section 28, below.) AT SURFACE: 990' FNL x 990' FWL 12. COUNTY OR PARISH 13. STATE AT TOP PROD. INTERVAL: Same San Juan AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL

PULL OR ALTER CASING

Install Compressor

MULTIPLE COMPLETE CHANGE ZONES

ABANDON\* (other)

30-045-07126 ATIONS (SHOW DF, KDB, AND WD) 6149' DF SUBSEQUEN SYGRYF Hepo GEOLOGICAL

5. LEASE

14. API NO.

SE-077383 -

7. UNIT AGREEMENT NAME

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

T28N, R10W

NM

30.) MAY 2 4 7 9 3 3

OIL CON. DIV. DIST. 3

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.)

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Subsurface Safety Valve: Manu. and Type	Set @	E-
18. I hereby certify that the foregoing is true and correct	357 (6)	, r
SIGNED TITLE Dist. Admin. Supving	5-10-83	
The spring for Transport and the Maria		

APPROVED BY TOF-APPROVAL IF ANY

TITLE

DAD

DISTRICT ENGI

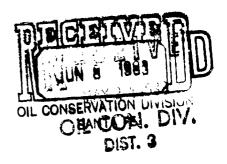
See Instructions on Reverse Side

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Thence NO1°05'E 25';
thence N89055'W 25';
thence \$01°05'W 25';
thence \$01°05'W 25';
thence \$89°55'E 25' to the point of beginning

Contains O.Oll: Acres more or less



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