Form 3160-5 (June 1990)

FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Do not use this form for proposals to drill of	ND REPORTS ON WELLS or to deepen or reentry to a different reservoir. PERMIT - " for such proposals	NMSF 07814 6. If Indian, Allottee or Tribe Name
USE AFFLICATION FOR	reminin - Tot such proposats	7. If Unit or CA, Agreement Designation
1. Type of Well Oil Well Well Other		
Well Other 2. Name of Operator	August	8. Well Name and No. Dav B 3
Amoco Production Company	Attention: Lois Raeburn	Day B 3
3. Address and Telephone No.	Loid Huobarri	3004508584
P.O. Box 800, Denver, Colorado 80201	(303) 830-5294	10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description	n)	Mesaverde
979'FNL 1639'FEL	Sec. 8 T 29N R 8W	11. County or Parish, State
		San Juan New Mexico
	s) TO INDICATE NATURE OF NOTICE,	
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent	Abandonment Recompletion Plugging Back	Change of Plans New Construction Non-Routine Fracturing
Subsequent Report	Casing Repair	Water Shut-Off
Final Abandonment Notice	Altering Casing Other Continue Shut-in	Conversion to Injection Dispose Water
	(Note: Re	prort results of multiple completion on Well Completion or stion Report and Log form.)
subsurface locations and measured and true vertical depths for	nission to continue the shut in status on subject	
	## 451 2 0 1935 H	<i>9</i>
	OH COM. DIY Oner 3	- /a.
5 i A	IS APPROVAL EARLING AUG 15 199	5
4. I hereby certify that the foregoing is true and correct?		
Signed Mais Allpurs	Title Business As	
his space for Federal or State office use)		APPROVED
Approved byConditions of approval, if any:	Title	JUL 1 7 1995

* See Instructions on Reverse Side

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 dictions, or department or agency of the United States any false dictions.