

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*

FORM APPROVED  
OMB NO. 1004-0135  
Expires: November 30, 2000

5. Lease Serial No.  
SF - 078414

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement Name and/or No.

8. Well Name and No.  
DAY 2E

9. API Well No.  
3004524914

10. Field and Pool, or Exploratory Area  
BLANCO MESAVERDE/BASIN DAKOTA

11. County or Parish, and State  
SAN JUAN NM

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well ☐ Oil Well ☒ Gas Well Other

2. Name of Operator  
AMOCO PRODUCTION COMPANY

3a. Address P.O. BOX 3092  
HOUSTON, TX 77079

3b. Phone No.(include area code)  
281.366.4491

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1000FEL 1750FSL

*I-8-29-8*

**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be files within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Amoco Production Company was in the process of fracture stimulation of the Cliffhouse and Upper Menefee intervals when a leak was detected in the subject well. Casing leak has been isolated in the 7" csg between 279' - 311' and circulation was established to the surface at 3 bbl/min. Amoco intends to proceed to perform the following action as approved verbally by Jim Lovato on March 20, 2001 at 8:40am. 1) Break circulation and attempt to circulate cement to surface. Once cement is brought to surface, shut in the csg valve and squeeze cement.2) Drill up cement and pressure test to 500 psi.3) Restimulate Cliffhouse and Upper Menefee using 3-1/2" tubing and a packer.

Electronic Submission #3091 verified by the BLM Well Information System for AMOCO PRODUCTION COMPANY Sent to the Farmington Field Office  
Committed to AFMSS for processing by Maurice Johnson on 03/23/2001

Name (Printed/Typed) MARY CORLEY

Title AUTHORIZED REPRESENTATIVE

Signature

Date 03/20/2001

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By

Title

Date 3/26/01

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office