

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. SF-078132
2. NAME OF OPERATOR Amoco Production Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 501 Airport Drive, Farmington, NM 87401		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 930' FSL x 1450' FWL		8. FARM OR LEASE NAME Annie L. Elliott "D"
14. PERMIT NO.		9. WELL NO. 9
15. ELEVATIONS (Show whether DP, RT, GR, etc.) 5912' GR		10. FIELD AND POOL, OR WILDCAT Basin Dakota
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SE/SW Sec. 11, T29N, R9W
		12. COUNTY OR PARISH San Juan
		13. STATE NM

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BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) Spud & Set Casing <input type="checkbox"/>	

(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.)\*

Spud a 12-1/4" hole on 11-20-84. Drilled to 316'. Set 9-5/8" 36#, K-55 casing at 316' and cemented with 295 cu. ft. Class B Ideal. Circulated cement to surface. Pressure tested casing to 1000 psi. Drilled an 8-3/4" hole to 2925' on 11-23-84. Set 7", 23#, K-55 casing at 2925'. Cemented with 531 cu. ft. Class B Ideal and tailed in with 118 cu. ft. Class B Ideal. Circulated to surface. Pressure tested casing to 1500 psi. Drilled a 6-1/4" hole to a TD of 7213' on 11-29-84. Set 4-1/2" 11.6#, K-55 casing at 7213' and cemented with 709 cu. ft. Class B 65:35 poz, 6% gel and tailed in with 177 cu. ft. Class B Ideal. Circulated to surface. No DV tool was set and the rig was released on 12-1-84.

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JAN 04 1985  
OIL CON. DIV.  
DIST. 3

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

SIGNED Original Signed By  
B. D. Shaw  
(This space for Federal or State office use)

TITLE Adm. Supervisor

DATE 12-20-84

ACCEPTED FOR RECORD

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE JAN 2 1985

FARMINGTON RESOURCE AREA

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\*See Instructions on Reverse Side

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