Form 3160-5 (June 1990)

Approved by

Conditions of approval, if any:

UNITED STATES DEPARTMENT OF THE INTERIOR BURFAU OF LAND MANAGEMENT

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

| BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT - " for such proposals | | | | Expires | 5. Lesse Designation and Serial No. NMNM-03526 8. If Indian, Allottee or Tribe Name | |
|---|--|--|---|--|---|--|
| | | | | N | | |
| | | | | 7. If Unit or CA, Agre | sement Designation | |
| 1. Type of Well Oil Ges Well Other 2. Name of Operator Attention: | | | | B. Well Name and No. Gallegos Canyon Unit 153 | | |
| Amoco Production Company 3. Address and Telephone No. | | Patty Haefele | | 9. API Well No. | 004507000 | |
| P.O. Box 800, Denver, | , CO 80201 | 201 (303) 830-4988 | | | 3004507908 10. Field and Pool, or Exploratory Area | |
| 4. Location of Well (Footage, Sec., T., R., M., o | | (300) 000 | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | asin Dakota | |
| 1065' FNL 1710' | | T 29N R 12W | Unit B | 11. County or Parish, San Ju | | |
| 12. CHECK APPROPR | IATE BOX(s) TO | INDICATE NATU | RE OF NOTICE | , REPORT, OR O | THER DATA | |
| TYPE OF SUBMISSION TYPE OF ACTION | | | N . | | | |
| Notice of Intent Subsequent Report Final Abandonment Notice | | Abandonment Recompletion Plugging Back Casing Repair Altering Casing Other Letter date | {Note: | Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Report results of multiple con pletion Report and Log form. | ı npletion on Well Completion or | |
| 13. Describe Proposed or Completed Operations subsurface locations and messured and true Amoco Production Comparand abandonment notice a Reference: NMSF-078578 | e vertical depthe for all markers as ny requests permission pproved 2/16/95. | nd zones pertinent to this wor | e frame to plug this | | | |
| | | | OE CE | 996 DIV. 2 | RECEIVED RECEIVED RECEIVED RECEIVED | |
| 14. I hereby certify that the foregoing is true and Signed Signed (This space for Federal or State office use) | correct Refele | Title | Staff As | sistant | Date03-05-1996 | |
| | | | | | | |

APPROVED