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NO. OF COPIES RECEIVED	4							Form C-103 Supersedes Old		1
DISTRIBUTION	 							C-102 and C-10	3	•
SANTA FE	$\perp \perp \mid \perp \mid \perp \mid$	NE NE	EW MEXICO OIL	CONSE	RVATION CO	MMISSION		Effective 1-1-65		
FILE		ļ					r	5a. Indicate Type o		
U.S.G.S.	 						Į	State X		
LAND OFFICE										Fee
OPERATOR	2	ļ						5. State Oil & Gas		۰.
								E-16	86	
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" (FORM C-101) FOR SUCH PROPOSALS.)										
OIL GAS WELL WELL	L X	OTHER-						7. Unit Agreement	Name	
2. Name of Operator								8. Farm or Lease Name		
AMOCO PRODUCTION COMPANY								State Gas Com "BR"		
3. Address of Operator								9. Well No.		
501 Airport Drive, Farmington, New Mexico 87401								1 1		
4. Location of Well								10. Field and Pool, or Wildcat		
		Basin Dakota								
UNIT LETTERE	; <u>_</u>	T430 FEE	T FROM THE	or cir	LINE AND	F	ET FROM	iiiiiiiiiiiii	7777	viiii
THE West	LINE, SECTI	on2	TOWNSHIP	29-N	RANGE	10-W	NMPM.			
mmm	m		Elevation (Show u	hether	DF RT CR etc	.)		12. County	444	HHH
	111111	//////////////////////////////////////	Fleadion (2 wow m		24' GL	••,		San Juan		
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16.	Check	Appropriate	Box To Indic	ate N	ature of Not	ice, Report	or Oth	er Data		
NOTE	CE OF II	NTENTION.	TO:	- 1		SUBSE	QUENT	REPORT OF:		
				l						
PERFORM REMEDIAL WORK	7		PLUG AND ABANDO	и 🔲 I	REMEDIAL WOR	•		ALTERI	G CASING	
TEMPORARILY ABANDON	าี				COMMENCE DRI	LLING OPNS.	\Box	PLUG AN	D ABANDO	NMENT
PULL OR ALTER CASING	╡ .		CHANGE PLANS	X	CASING TEST A	AD CEMENT JQB				_
PULL ON ALTER CASING					OTHER					
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OTHER										
17. Describe Proposed or Co	ompleted O	perations (Clea	rly state all pertin	ent deta	ils, and give pe	rtinent dates,	including	estimated date of si	arting an	y proposed
work) SEE RULE 1103.										
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This is to requ 10, 1979. Our	est an plans	extension call for	n of approy drilling th	al fo	or drillin ell in the	g, as the near fut	e appr	oval expires	; Octo	ber
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								Annual Control of the	4 L (3)	J. Comment
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18. I hereby certify that the	informatio	n above is true	and complete to th	e best	of my knowledge	and belief.		Nav.	- nist	
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-3.8.4	201.	JV			District	Fnaince		DATE OCTO	10× 5	1070
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APPROVEDENTAL Signal	<u>. ty 4.</u>	R. Kendri	.@# 	.ε	SUPERVISOR D	ISTR!CT 雅 3		DATEUU		