

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-1135  
Expires September 30, 1990

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

SUBMIT IN TRIPLICATE

|                                                                                                                                  |                                                         |
|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|
| 1. Type of Well<br><input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other | 5. Lease Designation and Serial No.<br>NM-048573        |
| 2. Name of Operator<br>Amoco Production Company Attn: John Hampton                                                               | 6. If Indian, Allottee or Tribe Name                    |
| 3. Address and Telephone No.<br>P.O. Box 800, Denver, Colorado 80201                                                             | 7. If Unit or C.A. Agreement Designation                |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)<br>900' FSL, 1820' FEL Sec. 15, T29N-R12W                 | 8. Well Name and No.<br>Bruington Gas Com B 1E          |
|                                                                                                                                  | 9. API Well No.<br>30 045 24008                         |
|                                                                                                                                  | 10. Field and Pool, or Exploratory Area<br>Basin Dakota |
|                                                                                                                                  | 11. County or Parish, State<br>San Juan, New Mexico     |

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

| TYPE OF SUBMISSION                                    | TYPE OF ACTION                                    |                                                  |
|-------------------------------------------------------|---------------------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> Notice of Intent             | <input type="checkbox"/> Abandonment              | <input type="checkbox"/> Change of Plans         |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Recompleuon              | <input type="checkbox"/> New Construction        |
| <input type="checkbox"/> Final Abandonment Notice     | <input type="checkbox"/> Plugging Back            | <input type="checkbox"/> Non-Routine Fracturing  |
|                                                       | <input checked="" type="checkbox"/> Casing Repair | <input type="checkbox"/> Water Shut-Off          |
|                                                       | <input type="checkbox"/> Altering Casing          | <input type="checkbox"/> Conversion to Injection |
|                                                       | <input type="checkbox"/> Other                    |                                                  |

(Note: Report results of multiple completion on Well Completion or Recompleuon Report and Log form.)

13. 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.)

1. Kill Well with 40 BBLs of 2% KCL WT.
2. Set Packer @ 5950' and Bridge Plug at 5980'; tst BP to 2000 # for 15 min. Held.
3. Load Annuuls and 2% KCL wt tst 4.5 csg to 1000 # for 20 min. Held.
4. Unset Packer & retainer bridge plug.
5. Circ. Hole, clean w/ Nitrogen
6. No casing leak found
7. RTH producing tbg, tsa 6233'.
8. Return to Production

RECEIVED

JUL 31 1990

OIL CON. DIV

DEPT. OF THE INTERIOR

Any questions please contact Cindy Burton @ 830-5119.

ACCEPTED FOR RECORD

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

|                                              |                                     |                               |
|----------------------------------------------|-------------------------------------|-------------------------------|
| Signed <u>J. Hampton/CB</u>                  | Title <u>Sr. Staff Admin. Supv.</u> | Date <u>JUL 24 1990/11/90</u> |
| (This space for Federal or State office use) |                                     |                               |

Approved by \_\_\_\_\_ Title \_\_\_\_\_ BY 21 Date \_\_\_\_\_

Conditions of approval, if any:

FARMINGTON RESOURCE AREA

NMOCD