## UNITED STATES

UNITED STATES	5. LEASE 25 8 8 8 8
	5. LEASE 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
DEPARTMENT OF THE INTERIOR	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
GEOLOGICAL SURVEY	6. IF INDIAN, ACCOUNT ON THE COMMAND
	7. UNIT AGREEMENT NAME &
SUNDRY NOTICES AND REPORTS ON WELLS	Gallegos Canyon Unit
Oo not use this form for proposals to drill or to deepen or plug back to a different servoir. Use Form 9-331-C for such proposals.)	
servoir. Use Form 9-331-C for such proposals.)	8. FARM OR LEASE NAME 39 36 4 5 5 6 6 5 5 6 6 5 5 6 6 5 6 6 6 6 6
1. oil gas 図	
well well other	9. WELL NO. 24 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
2. NAME OF OPERATOR	1 172
AMOCO PRODUCTION COMPANY	10. FIELD OR WILDCAT NAMES Basin Dakota 3 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
3. ADDRESS OF OPERATOR	
501 Airport Dr. Farmington, NM 87401	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SE/4 SW/4 Section 25
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	T29N, R13W = 55 5
h = Levy \	12. COUNTY OR PARISH 13. STATE
AT SURFACE: 960' FSL x 1530' FWL	San Juan San New Mexico
AT TOP PROD. INTERVAL: same	Barr 5 data
AT TOTAL DEPTH: same	14. API NO. 14. AP
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, ROB, AND WE)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	1 5005 02 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
KEQUEST TOK 711 THOUSE	व पुरुष १ व में असे हैं।
TEST WATER SHUT-OFF	
FRACTURE TREAT U . L SHOOT OR ACIDIZE	A bar yas geo ) bluo bluo cai y garan tot of
REPAIR WELL	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	change on Forms of multiple completion and both so of the books of the
MULTIPLE COMPLETE	한 항공원 및 스텔링 <b>15.</b>
CHANGE ZONES	9 44.50 15 30 50 51
ABANDON*	estoibutian extraso llaw estagaca in a became entre o medical records beautiful reco
(other) Completion	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates,	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give per disconsistance of the pertinent details, and give subsurface locations and 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.)*	
measured and true vertical depths for all markers and zones per unc	हिल्लिक च देखाँच .
	moth diffe no. 20 distribution distribution distribution
Completion operations commenced on 12-12-80. Total depth of the wells a	
is 6359', and plug back depth is 6313'. Terrorated investigation of 6072 - 6094', 6100 - 6106', and 6158 - 6216' with 2 spf, a total of fractitude	
6072 - 6094', 6100 - 6106', and 6136 - 6216 with 2 3pg, of Frac Ekuid	
172, .38" holes. Sand water fraced with 137,000 gallons of fracefilling	
and 349,000# of 20-40 sand. The 2 3/8" tubing was landed at 6235'.	
The well was swabbed and the rig released on 12-17-80.	
•	9 22 24 24 24 24 24 24 24 24 24 24 24 24
	Ave. Maria
Subsurface Safety Valve: Manu. and Type	Set @
18. I hereby certify that the foregoing is true and correct	
Original Signed by  SIGNED	Supvr <sub>DATE</sub> 1-28-81
SIGNED State office use)	
(This space for Federal or State office use)	
APPROVED BYTITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:	
	물송표현 - 월 - 영목불

\*See Instructions on Reverse Side