

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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.

5. Lease Designation and Serial No.

SF-079907

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Gallegos Canyon Unit 145E

9. API Well No.

3004524291

10. Field and Pool, or Exploratory Area

Basin Dakota

11. County or Parish, State

SAN JUAN NEW MEXICO

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
AMOCO PRODUCTION COMPANY
Attention: Pat Archuleta

3. Address and Telephone No.
P.O. BOX 800 DENVER, COLORADO 80201 (303) 830-5217

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
790' FNL 990'FWL Sec. 26 T 29N R 12W UNIT D

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"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other Braden Head Repair	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion 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.)

Amoco Production Company is cancelling it's request to perform a braden head repair on this well.

PAT will send
Report
She said they Rigged up
& found no leak
11-4-98
CP

RECEIVED
OCT 21 1998
OIL CON. DIV.
DIST. 3

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

Signed Pat Archuleta Title Staff Assistant Date 09-29-1998

(This space for Federal or State office use)

Approved by _____ Title _____ Date OCT 19 1998
Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious, or fraudulent statements or representations as to any matter within its jurisdiction.

FARMINGTON DISTRICT OFFICE

* See Instructions on Reverse Side

NMOCF