Submit 3 Copies to Appropriate District Office

Energy, Minerals and Natural Resources

Revised 1-1-89

DISTRICT I		0	IL CONSE	ERVATION	'ID NC	VISION					
P.O. Box 1980, Hobbs, NM 88240 P.O.Box 2					88			WELL API NO. 3004524616			
DISTRICT II Santa Fe, New Mexico 87504-2088								5 Indicate Type of Lease			
P.O. Drawer DD, Artesia, NM 88210								STATE FEE			
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410								6. State Oil & Gas Lease No.			
SUNDRY NOTICES AND REPORTS ON WELLS							TO A				
(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.)								7. Lease Name or Unit Agreement Name GALLEGOS CANYON UNIT			
1. Type of Well: OIL WELL GAS WELL GAS WELL OTHER									OALLEOO!	SOANIONO	
2. Name of Operator		Attention Nancy I. Whitaker				8. Well No. # 326					
AMOCO PRODU	JC HON CC	JMPAN'	Υ	Ivality I. vvintakei				9. Pool name or Wildcat			
P.O. Box 800	Box 800 Denver Co		Colorado	0 80201 30		303-830-5039		PICTURED CLIFFS			
4. Well Location Unit Letter	F:	161	O Feet From The	NOF	RTH	_Line and	15	40	_Feet From The	WEST	Line
Section	36		Township	29N	Range	13W		IMPM	SAN	JUAN	County
			10. Eleva	ation (Show w!	nether DF, 5565	<i>RKB, RT, GR</i> , KB	etc.)				
11.	Che	ck Apni	ropriate Box to	Indicate N	lature of	Notice Rep	ort or	Other	r Data		
			NTION TO:			•	SUB	SEQU	IENT REPOR	RT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON						REMEDIAL WORK ALTERING CASING					
TEMPORARILY ABANDON CHANGE PLANS						COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT					
PULL OR ALTER CASING					CAS	ING TEST AN	ID CEM	IENT JO	ов 🗌		
OTHER:	DEMAN	LTR FC	LLOWUP	X	отн	ER:					[_]
12. Describe Propos		eted Ope	rations (Clearly sta	ate all pertinen	t details, ar	nd give pertine	nt dates	s, includ	ing estimated da	te of starting any	proposed
AMOCO PRODUCT AN ADDITIONAL 96	TION COMP							E ABOV	E WELL AND R	EQUESTS	
	74						ć		a gija siin a a		
							,	e visit			
									### 14		
I hereby certify that	the informa	tion above	is true and compl	ete to the best	of my know	vledge and bel	lief.				
SIGNATURE	My	XI.	helake	7	TTTLE _	S	taff A	ssistaı	nt ————	10-02-1	997
TYPE OR PRINT NAME	(Nand	cy I. Whitaker						TELEPHONE NO.	303-830	-5039
(This space for Sta	ite										
APPROVED BY	JANA	44 GC	orione	mu	D	PUTY OIL &	GAS I	NSPEC	tor, dist. #3	DATE OCT	<u>- 6 199</u> ;
CONDITIONS OF APPE	ROVAL, IF ANY:	1	ntenonte	1. France	11-2-4	• 1					