

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☒ other ☐
2. NAME OF OPERATOR
Amoco Production Company
3. ADDRESS OF OPERATOR
501 Airport Dr., Farmington, NM 87401
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 810' FSL, 1530' FWL
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

- TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☒
CHANGE ZONES ☐
ABANDON* ☐
(other) ☐

SUBSEQUENT REPORT OF:

- ☐
☐
☐
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(NOTE: Report results of multiple completion or zone change on Form 9-330.)

U.S. GEOLOGICAL SURVEY
FEB 24 1983

5. LEASE
SF-078209B
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Gallegos Canyon Unit Com "H"
9. WELL NO.
180E
10. FIELD OR WILDCAT NAME
Undesignated Gallup
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SE/SW, Section 28,
T29N, R12W
12. COUNTY OR PARISH 13. STATE
San Juan NM
14. API NO.
30-045-24869
15. ELEVATIONS (SHOW DF, KDB, AND WD)
5322' GL

17. 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.)*

This well was spudded 1-9-82 and completed in the Basin Dakota formation on 2-2-82. Amoco Production Company plans to recomplete this well in the Undesignated Gallup formation and operate it as a dual well.

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ALCON. DIV.
FEB 23 1983

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED Original Signed By
B.T. Robinson TITLE Admin. Supvr. DATE 2-21-83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL IF ANY:

APPROVED

FEB 25 1983
JAMES F. SIMS
DISTRICT ENGINEER

*See Instructions on Reverse Side

NMOCC