

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME Gallegos Canyon Unit
2. NAME OF OPERATOR Amoco Production Co.		8. FARM OR LEASE NAME
3. ADDRESS OF OPERATOR 501 Airport Drive, Farmington, N M 87401		9. WELL NO. 135E
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1450' FNL x 1850' FEL		10. FIELD AND POOL, OR WILDCAT Basin DK/Totah GLP Ext
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SW/NE Sec26, T29N, R13W
15. ELEVATIONS (Show well depth, if on resource area) 5725' GR		12. COUNTY OR PARISH San Juan
		13. STATE NM

RECEIVED
MAY 01 1985

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Spud and Set Casing <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

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.) *

Spud a 12-1/4" hole on 4/14/85 at 1145 hrs. Drilled to 434'. Set 9-5/8", 36#, K55 casing at 429' and cemented with 325 cu.ft. Class B Portland. Circulated cement to surface. Pressure tested casing to 1000 psi for 30 minutes. Drilled an 8-3/4" hole to a TD of 6293' on 4/22/85. Set 7", 23#, J55 casing at 6293'. Stage 1: cemented with 556 cu.ft. Class B 65:35 poz and tailed in with 598 Class B 50:50 poz. Stage 2: cemented with 985 cu.ft. Class B 65:35 poz. Circulated cement to surface after both stages.

The DV tool was set at 3112' and the rig was released on 4/22/85.

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

SIGNED BDS Shaw TITLE Adm. Supervisor DATE 4/29/85

(This space for Federal or State office use)

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

ACCEPTED FOR RECORD

MAY 02 1985

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

DI
RV