

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

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	
2. Name of Operator AMOCO PRODUCTION COMPANY	
Attention: Nancy I. Whitaker	
3. Address and Telephone No. P.O. BOX 800 DENVER, COLORADO 80201 303-830-5039	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 910 FEL 2250 FNL Sec. 3 T 30N R 8W UNIT H	

5. Lease Designation and Serial No. NM - 012711
6. If Indian, Allottee or Tribe Name
7. If Unit or CA, Agreement Designation
8. Well Name and No. FLORANCE G # 3
9. API Well No. 3004527551
10. Field and Pool, or Exploratory Area BASIN FRUITLAND COAL GAS
11. County or Parish, State San Juan New Mexico

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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other DEEPEN RAT HOLE C/O
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<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.)*

MIRUSU 03/25/97

NU BOP EQUIP. PRESSURE TEST 10 - 30 MIN, 200 - 2000 PSI. TEST GOOD. TOH W/4 1/2" TBG. PU 6 1/4" BIT TIH TAG BRIDGE AT 2964'. C/O FROM 2964' TO BOTTOM W/1500 CFM AIR AND 10 BBL/HR FOAM/MIST. C/O TO BOTTOM AT 3143' W/1500 CFM AIR AND 10 BBL/HR FOAM/MIST. DRILL FROM 3143' TO 3156'. C/O TO BOTTOM W/ 1500 CFM AIR AND 10 BBLS/HR FOAM/MIST. TOH PU UNDER REAMER, TIH OPEN HOLE FROM 6.25" TO 9.5". UNDER REAM FROM 2936' TO 3050'. UNDER REAM FROM 3050' - 3145'. TOH LD UNDER REAMER, PU 6 1/4" BIT. TAG BRIDGE AT 2970'. C/O BRIDGES AT 2970-2982, 2985 - 2990, 2999-3014, 3019-3025, 3060-3067. 10' FILL FROM 3146-3156. CIRC W/1500 CFM AIR AND 10 BBLS/HR FOAM MIST. PULL UP TO SHOE AT 2930'. FLOW TEST 4 1/2 HRS THRU 3/4" CHOKE TO PIT. FLOW NATURAL THRU BLOOEIE LINES 2 HRS. C/O TO BOTTOM BRIDGE AT 2985', 3020', 3060'. CIRC W/1500 CFM AIR AND 10 BBLS/HR FOAM MIST. PULL TO SHOE, FLOW NATURAL THRU BLOOEIE LINES 4 HRS. C/O TO BOTTOM BRIDGE AT 3061'. 10' FILL. CIRC. 1500 CFM AIR AND 10 BBLS/HR FOAM MIST. TOH LD DC'S, DP'S. TIH W/ 5 1/2" LINER. TAG BRIDGE AT 2985'. CIRC AND WASH CSG TO BOTTOM. CIRC W/1500 CFM AIR, 10 BBL/HR FOAM MIST. SET LINE HANGER AND LINER AT TOP 2855', BOTTOM AT 3155'. RUN GR LOG 2830 - 3152' AND PERFORATE LINER AT 2958-2980, 3047-3065, 3105-3143 W/4 JSPF. TIH W/ 2 7/8" TBG LANDED AT 3125'. UNLOAD HOLE AND CIRC W/ 1500 CFM AIR.

RDSUMO 03/30/97

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

Signed *Nancy I. Whitaker*

Title Staff Assistant

Date 04-03-1997

(This space for Federal or State office use)

Approved by

Title

Conditions of approval, if any:

APR 09 1997

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 or fraudulent statements or representations as to any matter within its jurisdiction.

FARMINGTON DISTRICT OFFICE

* See Instructions on Reverse Side

NM000