

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-1135
Expires September 30, 1990

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-078385

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

SUBMIT IN TRIPLICATE

1. Type of Well

Oil Well Gas Well Other

2. Name of Operator

AMOCO PRODUCTION COMPANY

3. Address and Telephone No

P.O. BOX 800, DENVER COLORADO 80201 ATTN: JOHN HAMPTON RM 1846

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1788' FSL, 790' FWL SW/4 Sec ~~25~~ ²⁵ T. 10N, R. 8W

8. Well Name and No.

Florance K #3

9. API Well No.

30-045-27013

10. Field and Pool, or Exploratory Area

Basin Fruitland Coal Gas

11. County or Parish, State

San Juan, NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- Notice of Intent
- Subsequent Report
- Final Abandonment Notice

TYPE OF ACTION

- Abandonment
- Recompletion
- Plugging Back
- Casing Repair
- Altering Casing
- Other
- Change of Plans
- New Construction
- Non-Routine Fracturing
- Water Shut-Off
- Conversion to Injection

correct pool name

(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.)

To correct pool name from Undesignated Fruitland to Basin Fruitland Coal Gas.

See attached revised C-102.

RECEIVED

JUL 9 1990

**OIL CON. DIV.
DIST. 3**

Please call Cindy Burton (303) 830-5119 if you have any questions.

ACCEPTED FOR RECORD

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

Signed JL Hampton/cub

Title SR Staff Admin. Supv. Date 05/12/90

(This space for Federal or State office use)

FARMINGTON RESOURCE AREA

Approved by _____
Conditions of approval, if any:

Title

BY JL

Date

NMOCD

All distances must be from the outer boundaries of the Section.

o/k
Pool to Name Change

Operator Amoco Production Company		Lease Florance 'K'		Well No. 3
Unit Letter L	Section 25	Township 30N	Range 8W	County San Juan

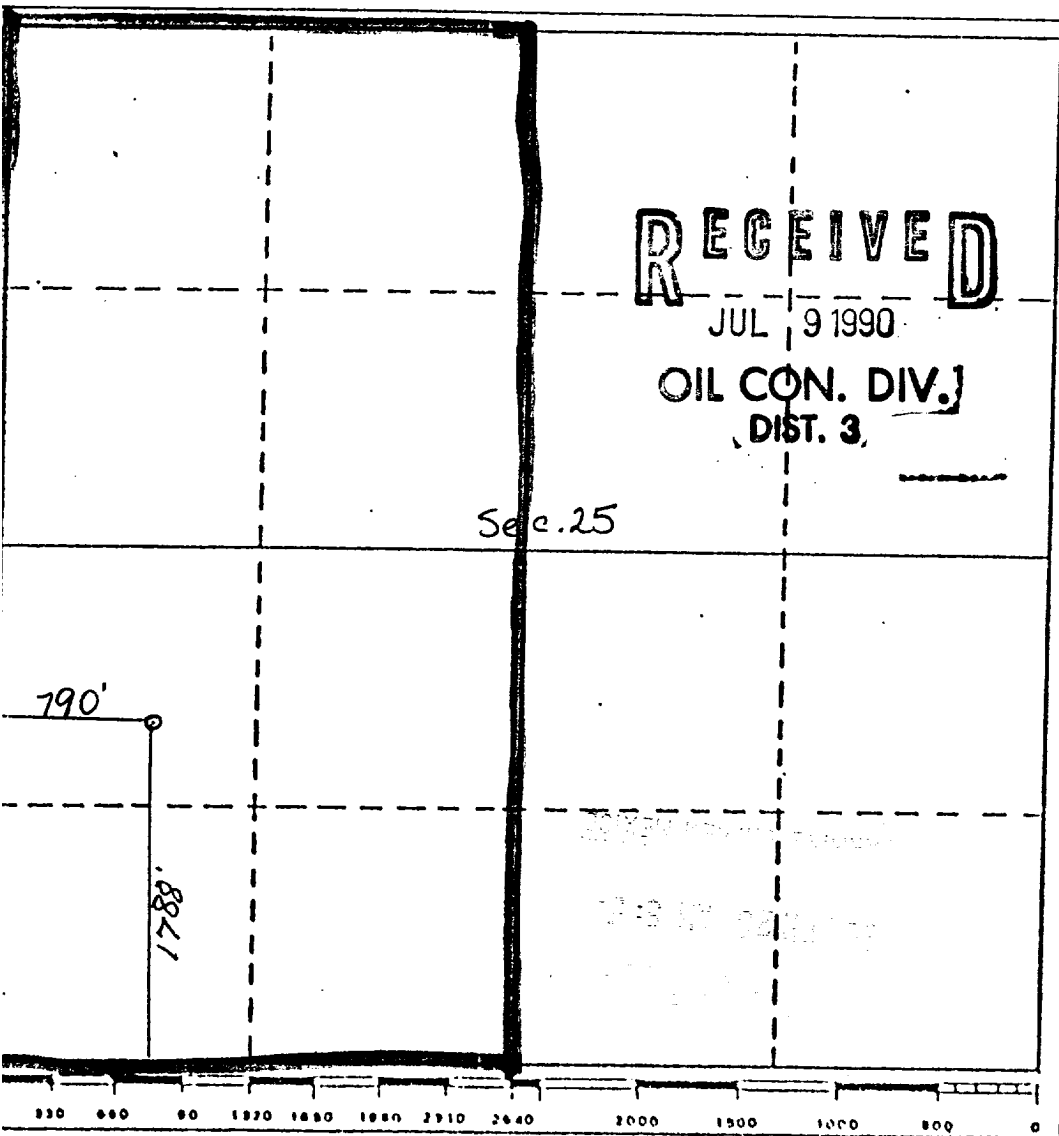
Actual Footage Location of Well:
1788 feet from the **South** line and **790** feet from the **West** line
 Ground Level Elev. **6195** Producing Formation **Fruitland Coal** Pool **Basin Fruitland Coal Gas w/2** Dedicated Acreage: **320** Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

Yes No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Division.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

J. L. Hampton / CUB
Name
J. L. Hampton

Position
Sr. Staff Admin. Supv.

Company
Amoco Production Co.

Date
4/18/90

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

on file
Date Surveyed

Registered Professional Engineer and/or Land Surveyor

Certificate No.

