

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form approved.
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 GAS WELL OTHER coal seam

2. NAME OF OPERATOR
Amoco Production Company ATTN: J.L. HAMPTON

3. ADDRESS OF OPERATOR
P. O. Box 800 Denver, Colorado 80201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
2465' FNL, 1220' FEL SE/NE

5. LEASE DESIGNATION AND SERIAL NO.
SF 081098A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Florance L

9. WELL NO.
4

10. FIELD AND POOL, OR WILDCAT
Basin Fruitland Coal Gas

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 3, T30N, R9W

12. COUNTY OR PARISH
San Juan

13. STATE
N. Mex

14. PERMIT NO. API
30-045-27412

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
6093' GR

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 COMPLETE <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) <u>spud and set casing</u> <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion of 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" surface hole on 7/16/89 at 9:15 hrs. Drilled to 300'.

Set 9 5/8" 36# K55 surface casing at 271'. Cemented with 250sx Cl B w/ 2% CaCl2. Circulated 21 BBLs to the surface. Pressure tested casing to 1500 psi. Drilled a 8 3/4" hole to a TD of 2679' on 7/19/89. Set 7" 23# K55 production casing at 2679'. Cemented with 475 sx Cl B Howco Lite Tail w/ 100 sx Cl B w/ 2% CaCl2, 1/4# 1/2x Flocele. Circulated 22 BBLs good cement to the surface.

Rig Released at 5:00 hrs. on 7/19/89.

RECEIVED
FEB 05 1990
OIL CON. DIV.
DIST. 3

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

SIGNED J.L. Hampton/cub TITLE Sr. Staff Admin. Supv. DATE 12/18/89

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side