

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 Drive, Farmington, N.M. 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 1650' FSL & 1800' FEL
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:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input checked="" type="checkbox"/>	<input type="checkbox"/>
(other)	

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.)*

Amoco requests approval to plug and abandon this well due to parted rods and uneconomical production. The proposed procedure is as follows:

1. Pull rods and tubing.
2. Spot 27 sx Class "B" Neat from PBD 2860' to 2630'. Top of Dakota is at 2682'.
3. Spot 46 sx Class "B" Neat from 1750' to 2150' over Gallup zone at 1800' to 2100'.
4. Spot 10 sx Class "B" Neat from 340' to 260' over surface casing shoe.
5. Spot 10 sx Class "B" Neat at surface, erect P X A marker, and cleanup location.

Subsurface Safety Valve: Manu. and Type _____

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

SIGNED [Signature] TITLE AREA ENGINEER DATE September 1, 1978

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

5. LEASE
14-20-604-78

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Ute Mountain Tribal

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Ute Mountain Tribal "J"

9. WELL NO.
3

10. FIELD OR WILDCAT NAME
Ute Dome Dakota

11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA
NW/4 SE/4, Sec 11, T-31-N R-14-W

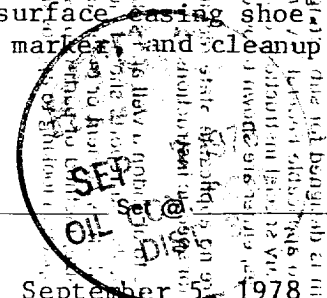
12. COUNTY OR PARISH
San Juan

13. STATE
New Mexico

14. API NO.
30-045-21179

15. ELEVATIONS (SHOW DF KDB AND WD)
5781' GL 5795' KB

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



Alia