

(November 1983)  
(Formerly 9-331)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE\*  
(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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> Coal Seam OTHER	5. LEASE DESIGNATION AND SERIAL NO. NM-013685
2. NAME OF OPERATOR Amoco Production Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 2325 East 30th Street, Farmington NM 87401	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1120' FSL x 810' FWL	8. FARM OR LEASE NAME Schwertfeger X
14. PERMIT NO.	9. WELL NO. 3
15. ELEVATIONS (Show whether OP, ST, GR, etc.) 6083' GR	10. FIELD AND POOL, OR WILDCAT Undesignated Fruitland
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 27, T31N, R9W
	12. COUNTY OR PARISH San Juan
	13. STATE NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) Pool Name Change <input checked="" type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input 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.)

The State of New Mexico has changed the pool name of this well from Undesignated Fruitland to Basin Fruitland Coal Gas, Case #9420, Order #R-8768, dated October 17, 1988. A new C102 is attached.

RECEIVED  
APR 04 1990  
OIL CON. DIV.  
DIST. 3

Accepted For Record

APR 02 1990

Chief, Branch of  
Mineral Resources  
Farmington Resource Area

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

SIGNED

*BSS*

TITLE Admin. Supv.

DATE 4-27-89

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

NMOC

\*See Instructions on Reverse Side

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

RECEIVED

SEP 14 1950

OFF. COM. DIA.  
DET. 3

# WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102  
Supersedes C-32  
Effective 1-1-85

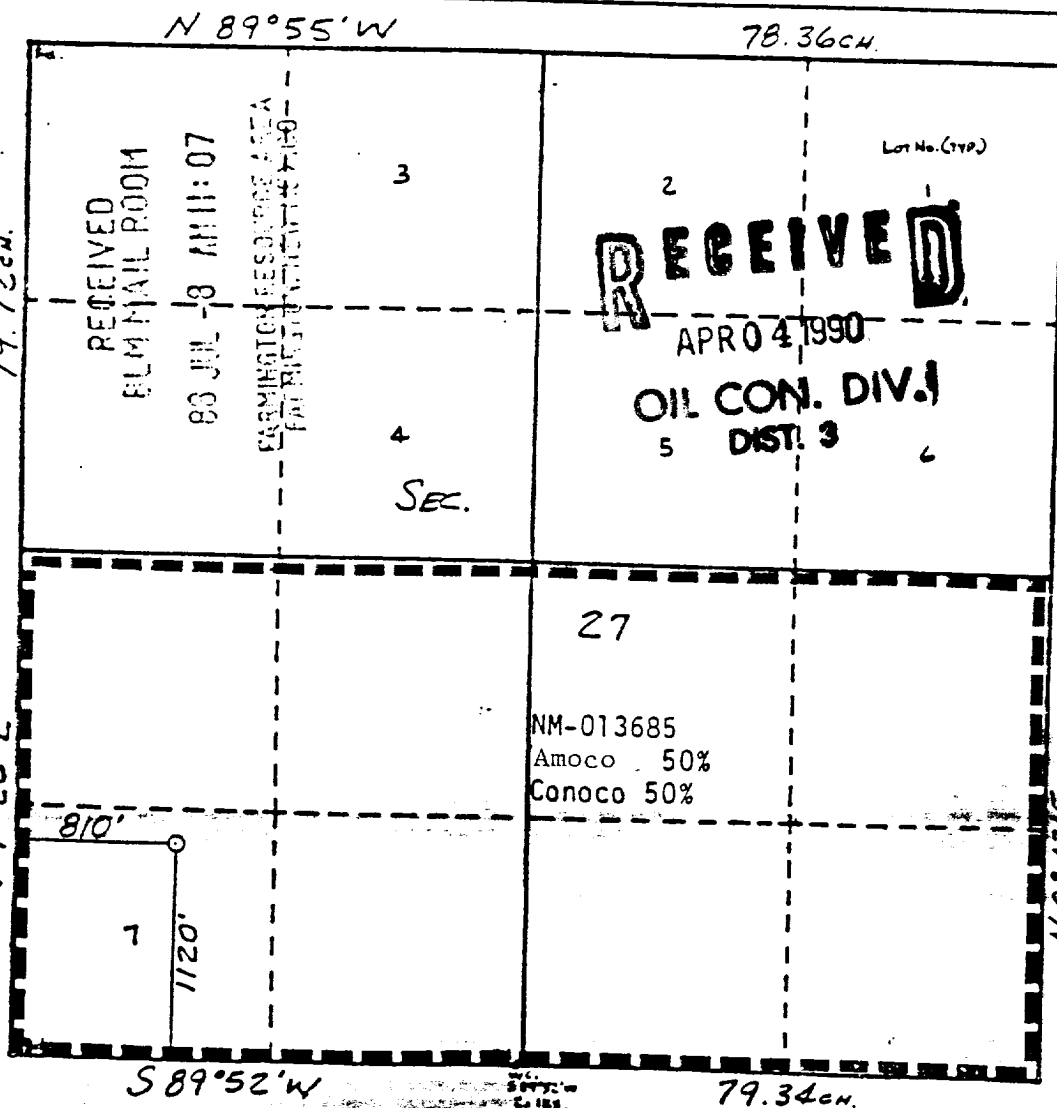
All distances must be from the outer boundaries of the Section

Operator Amoco Production Company			Lease SCHWERTFEGER A NM-013685		Well No. 3
Unit Letter M	Section 27	Township 31 N	Range 9 W	County SAN JUAN	
Actual Footage Location of Well: 1120 feet from the South line and 810 feet from the West line					
Ground Level Elev. 6083	Producing Formation Fruitland Coal	Pool Basin Fruitland Coal Gas		Dedicated Acreage 320 S/2 3/4 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 Commission.



## CERTIFICATION

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

*B. D. Shaw*

Name  
B. D. Shaw  
Position  
Admin. Supervisor  
Company  
Amoco Production Company  
Date  
4-27-89

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.

Date Surveyed 4-27-89	Registered Professional Engineer and Land Surveyor WILLIAM PEZZARRO No. 11111 Exp. 12/31/96
Certificate No. 11111	

159.45  
160.00  

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319.45

159.45

160.00