

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.)

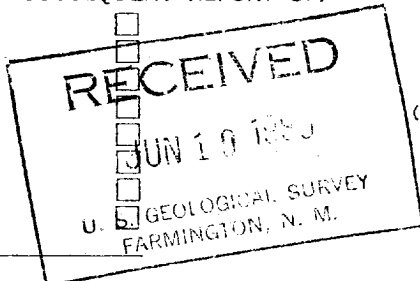
1. oil well ☐ gas well ☒ other ☐  
2. NAME OF OPERATOR  
AMOCO PRODUCTION COMPANY  
3. ADDRESS OF OPERATOR  
501 Airport Drive, Farmington, NM 87401  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
1820'  
AT SURFACE: 1870' FSL x 1590' FEL, Section 17,  
AT TOP PROD. INTERVAL: Same T32N, R12W  
AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐  
(other) Completion ☐

SUBSEQUENT REPORT OF:



5. LEASE  
NM-019414  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME  
Stanolind Gas Com "C"  
9. WELL NO.  
10. FIELD OR WILDCAT NAME  
Blanco Mesaverde/Basin Dakota  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
NW/4, SE/4, Section 17, T32N, R12W  
12. COUNTY OR PARISH  
San Juan  
13. STATE  
NM  
14. API NO.  
30-045-23779  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6023' TGL

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

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.)\*

Completion operations commenced again on 6-9-80. Total depth of the well is 6915' and the new plugback depth is 6446'. Ran Radio Active and Temperature surveys.

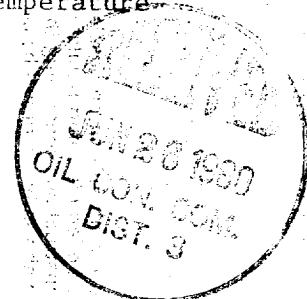
Landed 2-3/8" tubing at 6250'.

Released the rig on 6-11-80.

ACCEPTED FOR RECORD

JUN 24 1980

BY FARMINGTON DISTRICT



Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

Original Signed By  
SIGNED E. E. SVOBODA TITLE Dist. Adm. Supvr. DATE 6-17-80

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: