

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form Approved.
Budget Bureau No. 42-R1424

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 <input type="checkbox"/> gas well <input checked="" type="checkbox"/> 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.) AT SURFACE: 1120' FNL x 1760' FWL AT TOP PROD. INTERVAL: Same AT TOTAL DEPTH: Same |
| 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA |

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| 5. LEASE Jicarilla Contract 148 |
| 6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache |
| 7. UNIT AGREEMENT NAME |
| 8. FARM OR LEASE NAME Jicarilla Contract 148 |
| 9. WELL NO. 23 |
| 10. FIELD OR WILDCAT NAME Otero Chacra <i>et</i> |
| 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NE/NW, Section 13, T25N, R5W |
| 12. COUNTY OR PARISH Rio Arriba |
| 13. STATE New Mexico |
| 14. API NO. |
| 15. ELEVATIONS (SHOW DF, KDB, AND WD) 7364' GR |

| 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 type="checkbox"/> | <input type="checkbox"/> |
| (other) <u>Extension of Drilling Permit</u> | |

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

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JAN 31 1984
OIL CON. DIV.
DIST. 3

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 Production Company requests an extension of our approved drilling permit which is due to expire on 02-7 -84.

extended to 8/7/84

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DIST. 3

Subsurface Safety Valve: Manu. and Type

Set @

Ft.

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

SIGNED Original Signed By
D.D. Lawson TITLE Dist. Adm. Supervisor DATE January 23, 1984

APPROVED BY
(Indicate name and title of any)

TITLE

DATE

(This space for Federal or State office use)

*See Instructions on Reverse Side

| |
|------------------------------------------|
| APPROVED |
| JAN 26 1984 |
| <i>R. Hillebrand</i> |
| AREA ENGINEER FARMINGTON FIELD OFFICE |