

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(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.)

RECEIVED

SEP 12 1985

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	2. NAME OF OPERATOR Amoco Production Co.	3. ADDRESS OF OPERATOR 501 Airport Drive, Farmington, N M 87401	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 900' FNL X 960' FWL	14. PERMIT NO.	15. ELEVATIONS (Show whether DF, ET, GR, etc.) 6705' GR
--	---	--	--	----------------	--

5. LEASE DESIGNATION AND SERIAL NO. Jicarilla Contract 147	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache	7. UNIT AGREEMENT NAME	8. FARM OR LEASE NAME Jicarilla Contract 147	9. WELL NO. 5E	10. FIELD AND POOL, OR WILDCAT Undes. Gallup/Basin Dakota	11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA NW/NW 7-25-5	12. COUNTY OR PARISH Rio Arriba	13. STATE NM
---	--	------------------------	---	-------------------	--	--	------------------------------------	-----------------

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	STOP OR ALTER CASING
FRACTURE TREAT	MULTIPLE COMPLETION
SHOOT OR ACIDIZE	ABANDON*
REPAIR WELL	CHANGE PLANS
(Other) Status Sundry	X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREATMENT	ALTERING CASING
SHOOTING OR ACIDIZING	ABANDONMENT*
(Other)	

(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 recorded pressures for the Gallup formation are as follows:

July, 1985	Tubing	1950 psi (shut-in)
	Casing	1000 psi (shut-in)
August, 1985	Tubing	1850 psi (shut-in)
	Casing	1000 psi (shut-in)

RECEIVED
SEP 18 1985
OIL CON. DIV.
DIST. 3

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

SIGNED BD Shaw TITLE Adm. Supervisor

DATE 9-5-85

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

ACCEPTED FOR _____
DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

NMOCC

FARMINGTON

BY