

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved:
Budget Bureau No. 1004-0145
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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. Jicarilla Contract 148
2. NAME OF OPERATOR Amoco Production Co.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache
3. ADDRESS OF OPERATOR 501 Airport Drive, Farmington, N M 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 1870' FNL x 580' FEL	8. FARM OR LEASE NAME Jicarilla Contract 148
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, CR, etc.) BUREAU OF LAND MANAGEMENT 6930' GR FARMINGTON RESOURCE AREA	9. WELL NO. 34
	10. FIELD AND POOL, OR WILDCAT West Lindrith Gallup-Dakota
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SE/NE Sec 14, T25N, R5W
12. COUNTY OR PARISH Rio Arriba	13. STATE NM

RECEIVED

MAY 29 1985

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Spud and set casing</u>	<input checked="" 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.) *

Spud a 12-1/4" hole on 4-12-85 at 0945 hrs. Drilled to 328'. Set 8-5/8", 24#, K55 casing at 328' and cemented with 325 cu. ft. Class B Portland. Circulated cement to surface. Pressure tested casing to 1000 psi for 30 minutes. Drilled a 7-7/8" hole to a TD of 7920' on 4-27-85. Set 5-1/2", 15.5#, K55 casing at 7920'. Stage 1: cemented with 295 cu. ft. Class B Dowell and tailed in with 555 cu. ft. Class B Dowell. Stage 2: cemented with 1711 cu. ft. Class B Dowell. Circulated cement to surface after both stages.

The DV tool was set at 5220' and the rig was released on 4-27-85.

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

SIGNED

BDS Shaw

TITLE Adm. Supervisor

DATE 5-22-85

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

MAY 29 1985

*See Instructions on Reverse Side

NMOCC

FARMINGTON RESOURCE AREA
RV: [Signature]