

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: September 30, 1990

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT--" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☐ OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator

Amoco Production Company Attn: Melissa Velasco-Price

3. Address and Telephone No.

P.O. Box 3092 Houston, TX 77253 (281) 366-2548

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1080' FNL & 1720' FEL Sec 15 T28N R12W Unit B

5. Lease Designation and Serial No.

SF-078106

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Gallegos Canyon Canyon 297

9. API Well No.

30-045-23996

10. Field and Pool, or Exploratory Area

Pictured Cliffs

11. County or Parish, State

San Juan New Mexico

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other
- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection

BLM Letter 6-20-00

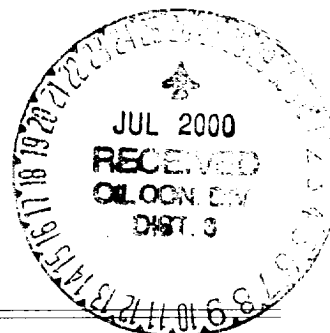
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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 permission to continue the shut in status of the subject well until potential well repair work has been fully evaluated to determine if the well can be return to production status in the current zone, a possible uphole completion or plugged and abandoned.

THIS APPROVAL EXPIRES

FEB 01 2001



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

Signed Melissa Velasco-Price Title **Permitting Assistant**

Date **07/17/00**

(This space for Federal or State office use)

Approved by _____ Title _____

Date **7/24/00**

Conditions of approval, if any:

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.

*See Instructions On Reverse Side

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