

FORM 3100-1
(November 1983)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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. <input checked="" type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	5. LEASE DESIGNATION AND SERIAL NO. SF-080844
2. NAME OF OPERATOR Amoco Production Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 501 Airport Drive, Farmington, NM 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 1850' FNL x 790' FWL	8. FARM OR LEASE NAME T.L. Rhodes "C"
14. PERMIT NO.	9. WELL NO. 1E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5911' GR	10. FIELD AND POOL, OR WILDCAT Basin Dk/Simpson GP
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SW/NW Sec. 30, T28N, R11W
	12. COUNTY OR PARISH 13. STATE San Juan NM

16. 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) completion <input checked="" type="checkbox"/>	

(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.)

Moved in and rigged up service unit 1/18/85. Total depth of the well is 6503' and plugback depth is 6454'. Pressure tested production casing to 3500 PSI. Perforated the following intervals: 6420'-6406', 6396'-6376', 6376'-6358', 6316'-6310', and 6298'-6282', 2 jspf, .48" in diameter, for a total of 148 holes. Fraced interval 6406'-6282' with 120,000 gals. of 70 quality foam and 155,000# 20-40 sand.

Landed 2-3/8" tubing at 6423' and released the rig on 1/31/85.

RECEIVED
FEB 19 1985
BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA
MAR 06 1985
OIL CON. DIV.
DIST. 3

I hereby certify that the foregoing is true and correct

SIGNED B. D. Shaw TITLE Admin. Supervisor DATE 2/12/85

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____

*See Instructions on Reverse Side

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 omissions as to any matter within its jurisdiction.