

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form approved.
Budget Bureau No. 1004-0135
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

JUL 02 1985

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

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

1850' FSL x 1850' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

5778' GR

5. LEASE DESIGNATION AND SERIAL NO.

SF-078828A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Gallegos Canyon Unit

8. FARM OR LEASE NAME

9. WELL NO.

233E

10. FIELD AND POOL, OR WILDCAT

Basin DK/Simpson GLP

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

NW/SE Sec 27, T28N, R12W

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:

FRAC TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

FRAC TREATMENT

SHOOTING OR ACIDIZING

(Other)

Supplemental Sundry

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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 cement was circulated to the surface after both stages while setting the 7" casing for the subject well.

RECEIVED
JUL 05 1985
OIL CON. DIV.
DIST. 3

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

SIGNED

R. D. Shaw

TITLE Adm. Supervisor

DATE 6-24-85

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

ACCEPTED FOR RECORD

JUL 03 1985

FARMINGTON RESOURCE AREA

BY

*See Instructions on Reverse Side

NMOCC