

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

Docket/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.)

1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM-0309374
2. NAME OF OPERATOR Amoco Production Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
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 1570' FSL x 1680' FWL		8. FARM OR LEASE NAME G. L. Davies
14. PERMIT NO. JAN 24 1986		9. WELL NO. 1E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5993' GR		10. FIELD AND POOL, OR WILDCAT Basin Dk/Amarillo Gallup
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NE/SW Sec 27, T28N, R13W
		12. COUNTY OR PARISH San Juan
		13. STATE New Mexico

16. BUREAU OF LAND MANAGEMENT Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

17. FARMINGTON RESOURCE AREA

18. ACTION TO BE TAKEN TO:  
TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
(Other) ☒ Special GOR test

PULL OR ALTER CASING ☐  
MULTIPLE COMPLETION ☐  
ABANDON\* ☐  
CHANGE PLANS ☐

WATER SHUT-OFF ☐  
FRACTURE TREATMENT ☐  
SHOOTING OR ACIDIZING ☐  
(Other) ☐

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.)

Amoco Production Company requests approval to run a special test on the subject well. The Gallup formation of the well needs to be retested to obtain data required for a commingling application. The subject well is a dual Gallup-Dakota and has 4 1/2" production casing. Without the commingling application, there is no efficient method to produce both zones. Amoco requests a no-flare exception for a four-day period. The estimated gas rate is 120 mcf/d.

Verbal approval received from Ken Townsend on 1-22-86.

RECEIVED  
JAN 28 1986  
OIL CO. DIV.  
DIST. 2

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

SIGNED B. Shaw

TITLE Adm. Supervisor

DATE 1-22-86

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APPROVED

\*See Instructions on Reverse Side

JAN 27 1986  
M. MILLENBACH