

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Budget Bureau No. 1004-C
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 ☐ GAS WELL ☒ OTHER ☐	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR <i>Amoco Production Company</i>	8. FARM OR LEASE NAME <i>G.L. DAVIES</i>
3. ADDRESS OF OPERATOR <i>200 Amoco Court Farmington, NM 87401</i>	9. WELL NO. <i>1E</i>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT <i>Basin Dakota</i>
14. PERMIT NO.	11. SEC. 2, 3, 4, OR NEK AND SURVEY OF AREA <i>NE/SW 5 27-28N-13W</i>
15. ELEVATIONS (Show whether at, to, or from)	12. COUNTY OR PARISH 13. STATE <i>SAN JUAN NM</i>

RECEIVED

APR 15 1991

OIL CON. DIV.

DIST. 3

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) *Flow Test Well*

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☒

SUBSEQUENT REPORT OF:

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 and 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 flow test the subject well for up to 15 days to determine economics of pipeline connection. Gas flows will be flared.

The Gallup formation was completed in *APR, '86* ~~MARCH, 1985~~

APPROVED

FEB 19 1991

Approved

Chief, Branch of
Mineral Resources
Farmington Resource Area

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

SIGNED

J.D. Shaw

AREA MANAGER

Coordinator

DATE

1-25-91

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side
NMOCD