UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

Э.	LEASE	
	SF-078887	

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6.	IF INDIAN,	ALLOTTEE OR	TRIBE NAME

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CHINDDA	NOTICES		REPORTS	ΩN	WFITS
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(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-331-C for such proposals.)

- gas well X well other
- NAME OF OPERATOR Amoco Production Company
- 3. ADDRESS OF OPERATOR 501 Airport Dr., Farmington, NM 87401

Same

- 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 1100' FNL x 790' FWL AT TOP PROD. INTERVAL: AT TOTAL DEPTH:
- 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

8. FARM OR LEASE NAME Rosa Unit

7. UNIT AGREEMENT NAME

9. WELL NO. 87

10. FIELD OR WILDCAT NAME Wildcat Gallup/Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NW/NW, Section 12, T31N, R4W

12. COUNTY OR PARISH 13. STATE Rio Arriba

14. API NO.

30-039-22766

15. ELEVATIONS (SHOW DF, KDB, AND WD) 7004 GL

REQUEST FOR APPROVAL TO: **TEST WATER SHUT-OFF** FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE **CHANGE ZONES** ABANDON* PxA Dakota (other)

SUBSECUENT REPORT OF:



Report results of multiple completion or zone change of Form 9–330.)

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 plug and abandoned the Dakota formation on 8-30-82 as follows:

- Set cement retainer at 8646' and squeezed with 53 sx of Class "H" cement 1) containing .4% D-13.
- 2) Cement top located at 8519'.

The corrected plugback depth is 8519'.

Subsurface Safety Valve: Manu. and Type ___ ___ Set @ ____ Ft. 18. I hereby certify that the foregoing is true and correct Original Signed By TITLE Dist. Admin. Supvr_{D'ATE} SIGNED ____ ົບ.ປີ. Lawson ASSETTED FOR EXCORD ce for Federal or State office use) APPROVED BY _ TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: MAR 30 1983



See Instructions on Reverse Side

