Form 3160-5 (November 1983) (Formerly 9-331)

16.

## UNITED STATES DEPARTMENT OF THE INTERIOR

6767' GR

SUBMIT IN TRIPLICATE\*
(Other instructions on reverse side)

Form approved. Budget Bureau No. 1004-0135

Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL NO.

SF\_078892

BUREAU UP LANG	MANAGEMENT	31-070034
CHAIDDY MOTICES AND	DEDONTS ON WELLS	6. IF INDIAN, ALCOTTEE OR TRIBE NAM

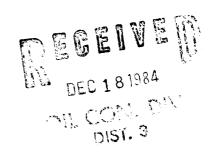
(De not use this form	NOTICES AND KEP or proposals to drill or to deep expedication for permit—	en or plug back to a different reservoir.		
1.			7. UNIT AGREEMENT NAME	
OIL GAS K	OTHER		Rosa Unit	
2. HAMB OF OPERATOR			8. PARM OR LEASE NAME	
Amoco Production	ı Company			
3. ADDRESS OF OPERATOR			9. WELL NO.	
501 Airport Driv	re, Farmington, NM	87401	104	
4. LOCATION OF WELL (Report	ocation clearly and in accordance	with any State requirements.	10. FIELD AND POOL, OR WILDCA	
At surface		KECEIVED	Basin Dakota/Undes.	. Gallup
<b>1720' FNI</b> /834	. x <b>11-50'</b> FEL /3/0	DEC 10 1994	11. HBC., T., B., M., OR BLK. AND SURVEY OR AREA	
7000		BUREAU OF LAND MONAGEMENT	SE/NE, Sec. 14, T31	N, R4W
14. PERMIT NO.	15. ELEVATIONS (Show	whether or, who as, etc.)		TE
	6767' GR		Rio Arriba N	Μ

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

NO	MCS OF INT	ENTION TO:		#URABQUENT	REPORT OF:	
TEST WATER SHUT-OFF		PULL OR ALTER CASING		WATER SHUT-OFF	REPAIRING WELL	
FRACTURE TREAT		MULTIPLE COMPLETE		FRACTURE TREATMENT	ALTERING CASING	
SHOOT OR ACIDIZE		ABANDON*	11	SHOOTING OR ACIDIZING	ABANDONMENT*	<u> </u>
REPAIR WELL		CHANGE PLANS		(Other)		
(Other) Change	casing		<u> </u>	(Nors: Report results of me Completion or Recompletion	ultiple completion on Wel 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 gones pertinent to this work.) \*

Amoco Production Company requests approval to change the casing from 11-3/4", 42#, H-40 to 13-3/8", 54.5 #, J-55



			APPROVED
1 h.	Original Signed By B. D. Shaw	TITLE Adm. Supervisor	DATE 10-29-84
	This space for Federal or State office use)		DEC 1 4 1984
	APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	Za/ J Stan Mokea  CSUL  FARMMIC
	*Se	e Instructions on Reverse Side	THE PROPERTY AND A STATE OF THE PROPERTY OF TH