

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT - " for such proposals

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	
2. Name of Operator Amoco Production Company	Attention: Bob Wilbanks
3. Address and Telephone No. P.O. Box 800, Denver, Colorado 80201 (303) 830-5066	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 880 FSL 1880FWL Sec. 21 T 31N R 5W SE/SW	

5. Lease Designation and Serial No. SF-078769
6. If Indian, Allottee or Tribe Name
7. If Unit or CA, Agreement Designation
8. Well Name and No. Rosa Unit 111
9. API Well No. 3003923621
10. Field and Pool, or Exploratory Area Basin Dakota/Undes Gip
11. County or Parish, State Rio Arriba New Mexico

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent <input type="checkbox"/> Subsequent Report <input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input checked="" type="checkbox"/> Other <u>Change of Operator</u> <input type="checkbox"/> Change of Plans <input type="checkbox"/> New Construction <input type="checkbox"/> Non-Routine Fracturing <input type="checkbox"/> Water Shut-Off <input type="checkbox"/> Conversion to Injection <input type="checkbox"/> Dispose Water
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

13. 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 that operatorship be changed to ~~Williams Production Company~~ effective immediately.
Northwest Pipeline Co.

If you have any questions in regards to this matter please contact Bob Wilbanks at the number listed above.

RECEIVED
AUG 16 1993
OIL CON. DIV.
DIST. 3

RECEIVED
BLM
93 AUG -5 AM 11:10
070 FARMINGTON, NM

14. I hereby certify that the foregoing is true and correct		
Signed <u>Bob Wilbanks</u>	Title <u>Business Analyst</u>	Date <u>08-02-1993</u>
(This space for Federal or State office use)		

Approved by _____	Title _____
Conditions of approval, if any:	

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

ACCEPTED FOR RECORD
AUG 17 1993
FARMINGTON DISTRICT OFFICE
BY 225