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

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

Form approved.
Budget 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.)

5. LEASE DESIGNATION AND SERIAL NO.: SF-078051

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT AGREEMENT NAME:

OIL WELL ☐ GAS WELL ☐ OTHER Test Well

8. FARM OR LEASE NAME: Mesaverde Strat Test

2. NAME OF OPERATOR: Amoco Production Company

3. ADDRESS OF OPERATOR: 200 Amoco Court Farmington, NM 87401

9. WELL NO.: #1

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 1500 FSL + 1500 FEL

10. FIELD AND POOL, OR WILDCAT: Mesaverde

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: NW/SE 14-31N-11W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

12. COUNTY OR PARISH: San Juan

13. STATE: NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐	WATER SHUT-OFF	☐
FRACTURE TREAT	☐	FRACTURE TREATMENT	☐
SHOOT OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☐
REPAIR WELL	☐	(Other) Change of operator	☒
(Other)	☐		

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

RECEIVED
JUL 9 1990
OIL CON. DIV.
DIST. 3

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.)

Please change the operator from Tenneco to Amoco on the subject test well.

Note: Amoco does not have a well file on this one. Please advise lease number and provide a copy of the APD if possible.

Thanks,

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

SIGNED B.J. Shaw TITLE Environmental Coordinator DATE 4-20-90

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD
JUL 1990
FARMINGTON RESOURCE AREA
BY _____

*See Instructions on Reverse Side

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.