

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

5. Lease Designation and Serial No.

SF-078095

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Mudge LS #23

9. API Well No.

3004511078

10. Field and Pool, or Exploratory Area

Basin Dakota

11. County or Parish, State

San Juan, New Mexico

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Attention:

AMOCO PRODUCITON COMPANY

GAIL JEFFERSON

3. Address and Telephone No.

P.O. Box 800, Denver, Colorado 80201

(303) 830-6157

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1030' FNL 1555' FEL Sec. 5 T 31N R 11W

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

TYPE OF ACTION

☐ Notice of Intent

☒ Subsequent Report

☐ Final Abandonment Notice

☐ Abandonment

☐ Recompletion

☐ Plugging Back

☐ Casing Repair

☐ Altering Casing

☒ Other Cancel Bradenhead

Repair

☐ Change of Plans

☐ New Construction

☐ Non-Routine Fracturing

☐ Water Shut-Off

☐ Conversion to Injection

☐ 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 hereby notifies you that we have decided to cancel our request for a Bradenhead repair which was approved September 29, 1992. A copy of the Bradenhead test report is attached.

If you have any technical questions, please contact Khahn Vu at (303) 830-4920 or myself for any administrative questions.

RECEIVED
MAR 20 1995
OIL CON. DIV.
DIST. 3

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

Signed

Gail M. Jefferson

Title

Business Assistant

Date

03-08-1995

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

ACCEPTED FOR RECORD

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.

MAR 1 1995

* See Instructions on Reverse Side

AMOCO

FARMINGTON DISTRICT OFFICE

Well Work Procedure - Bradenhead

Print Date: 01-Mar-95

WELLNAME: MUDGE LS **NUM:** 023

API FM: 300451107800DK

BH REMED YR:

BH92 TEST DATE: 8/23/92

BH92 BH PRESS: 11

BH92 INT PRESS: 0

TUBING: 372

CASING: 381

BH92 COMMENTS: BLEW DOWN IN 3 MIN

BH93 TEST DATE: 8/12/93

BH93 BH PRESS: 8

BH93 INT PRESS: 322

BH93 PRESS TBG: 965

BH93 PRESS CSG: 966

BH93 BHOPEN 5: 0

BH93 BHOPEN 10: 0

BH93 BHOPEN 15: 0

BH93 COMMENTS: INTER B/D-4 MIN.

BH94 TEST DATE:

BH94 BH PRESS:

BH94 INT PRESS:

BH94 PRESS TBG:

BH94 PRESS CSG:

BH94 BHOPEN 5:

BH94 BHOPEN 10:

BH94 BHOPEN 15:

BH94 COMMENTS: