

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well ☐ gas well ☒ other ☐

2. NAME OF OPERATOR
AMOCO PRODUCTION COMPANY

3. ADDRESS OF OPERATOR
501 Airport Drive Farmington, NM 87401

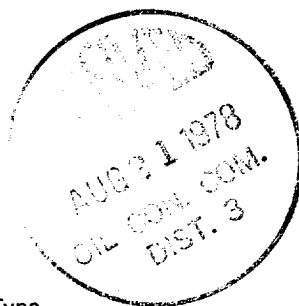
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
990' FNL x 1540' FWL, Section 12,
AT SURFACE: T-31-N, R-14-W
AT TOP PROD. INTERVAL: Same
AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:	SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF <input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE <input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES <input checked="" type="checkbox"/>	<input type="checkbox"/>
ABANDON* <input type="checkbox"/>	<input checked="" type="checkbox"/>
(other) <u>Gallup</u>	

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.)*

On 7/26/78, tripped in hole. Set cement retainer at 2043'. Squeezed perforations 2190-2246' with 150 sx Class "B" Neat cement. Propose to test in saverde from 400' to 790'.



Subsurface Safety Valve: Manu. and Type _____

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

SIGNED E.E. Svoboda TITLE Area Adm. Supvr. DATE 8/14/78

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

5. LEASE
14-20-604-78

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Ute Mountain Tribe

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Ute Mountain Tribal

9. WELL NO.
5

10. FIELD OR WILDCAT NAME
Undesignated Dakota

11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA
NE/4 NW/4 Section 12,
T-31-N, R-14-W

12. COUNTY OR PARISH
San Juan

13. STATE
NM

14. API NO.
30-04522947

15. ELEVATIONS (SHOW DE KDB AND WD)
6139' GL

(NOTE: Report results of multiple completion or zone change on Form 9-330.)