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

16.

UNITED STATES DEPARTMENT OF THE INTERIOR verse side)

SUBMIT IN TRIPLICATE. instructions on

Budget Bureau No. 1004-0135 Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

BUREAU OF LAND MANAGEMENT SF-078106

 MOTICEC	ANID	DEDODIC	AN	VA/E1	1.0

SUNDRY NOTICES AND REPORTS ON WELLS

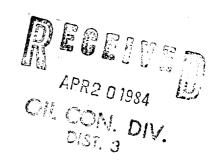
(Do not use this form for pro- Use "APPI	oposals to drill or to deepen or plug back to a different reservoir. JICATION FOR PERMIT—" for such proposals.)		
I		7. UNIT AGREEMENT N.	AME
WELL GAS X OTHER	ı.	Gallegoes C	anyon Unit
2. NAME OF OPERATOR		8. FARM OR LEASE NA	
Amoco Production Com	pany		
3. ADDRESS OF OPERATOR	The second secon	9. WHLL NO.	
Farmington, NM 87401	RECEIVED	224E	
LOCATION OF WELL (Report location See also space 17 below.)	n clearly and in accordance with any State requirements.*	10. FIELD AND POOL, O	R WILDCAT
At surface	MAR 12 1984	Basin Dakot	a
	BUREAU OF LAND BUREAU	11. SEC., T., R., M., OR	
810' FSL X 1850' FEL			Section 18
		T28N, R12W	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISE	1 18. STATE
	5691' GR	San Juan	NM

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

NOTICE OF INTENTION TO:			SUBSEQUENT 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*		SHOOTING OR ACIDIZING		ABANDONMENT*
REPAIR WELL		CHANGE PLANS		(Other)		
(Other) Exter	nsion	of drilling perm	nit	(Note: Report rest Completion or Reco	il ts d mple	of multiple completion on Well tion 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 an extension of our drilling permit which is due to expire 3-28-84. We anticipate spudding this well by 9-28-84.



18. I bereby certify that the foregoing is true and correct SIGNED FROM SIGNED	TITLE Administrative Supervisor	DATE	3-8-84
(This space for Federal or State office use)	Aggariate Diet Menager		AND CONTRACTOR
APPROVED BY 787 Michael F. Reitz CONDITIONS OF APPROVAL, IF ANY:	TITLE Associate Dist. Manager	DATE	MAR 28 1384

This approval expires September 28, 1984 NMOCO drilling operations must be commenced *See Instructions on Reverse Side by that date.