

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

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	7. If Unit or CA, Agreement Designation
2. Name of Operator Kay Jay Oil Co	8. Well Name and No. Amoco Federal #1
3. Address and Telephone No. P.O. Box 1306, Artesia, NM 88210 (505) 746-6100	9. API Well No. 30-005-60233
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980 FNL 1980 FEL, Sec. 23-T14S-R29E	10. Field and Pool, or Exploratory Area "LL" Queen Assoc
	11. County or Parish, State Chaves

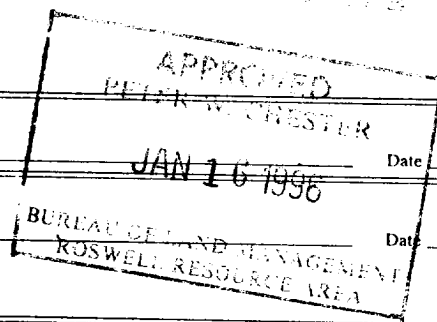
CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other request for shut in status
	<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

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.)*

We request the above well be given a TA status for 1 year.
Attached is a copy of the fluid level graph.

14. I hereby certify that the foregoing is true and correct	
Signed <u>John Smith</u>	Title Agent
(This space for Federal or State office use)	
Approved by	12/5/95
Conditions of approval, if any: APPROVED FOR 12 MONTH PERIOD ENDING DEC 2 1996	



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.

This Approval of Temporary
Abandonment Expires 12/2/96

*See Instruction on Reverse Side

DATE: 1961-11-10