Form 3160-5 (November 1983) (Formerly 9-331)	DEPARTI	UNITED STATE	INTERIO	SUBMIT IN TRIPLICATE (Other instructions on a	By B. L.	Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1985 ASS DESIGNATION AND SERIAL NO.	
		U OF LAND MANA			- Ji	carilla Contract 146 INDIAN, ALLOTTEE OR TRIBE NAME	
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.)						Jicarilla Apache	
OIL GAM WELL WELL	L XX OTHER						
2. NAME OF OPERATOR						RM OR LEASE NAME	
Amoco Production Company						carilla Contract 146	
8. ADDRESS OF OPERATOR						21	
501 Airport Drive, Farmington, NM 87401 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*						VIELD AND POOL, OR WILDCAT	
See also space 17 t At surface	helow.)	FSL x 1690' F				cero Chacra/Basin Dakot BC. T. R. W., OR BLK. AMD SURVEY OR ARMA	
						/4 Sec. 3, T25N, R5W	
14. PERMIT NO.	ERNIT NO. 15. ELEVATIONS (Show w			D		o Arriba NM	
6.	Check Ap	propriate Box To In	dicate Na	ture of Notice, Report, or	Other I	Data	
	•• •					FORT OF:	
TEST WATER SHOT	C-OFF I	CLL OR ALTER CASING	7	WATER SHUT-OFF		REPAIRING WELL X	
FRACTURE TREAT		TULTIPLE COMPLETE		FRACTURE TREATMENT		ALTERING CASING	
SHOOT OR ACIDIZE		BANDON*	_	SHOOTING OR ACIDIZING		ABANDONMENT*	
REPAIR WELL	·	HANGE PLANS		(Other) (Note: Report resul	ts of mu	itiple completion on Well deport and Log form.)	
(Other)		Clearly etate of				leport and Log form.) ing estimated date of starting any	
pressure t from 3796	tested the l	packside to 150 Spotted 65 c	00 psi. .f. Cla: - 3900'	10/84. Set a bridg Set a packer at 4 ss B cement across -4279'. Pressure t g at 7273'. Releas	casin ested	g holes 3796'-4630'. to 1000 psi. Set	
	M (8 O 3 9 90		RECEIV OCT 2 5 1984	C F	IVED	
	MOSSIVEM						
	G D	~ 423		OCT 2 5 1984	1		
		JAN 1 7 1985		BUREAU OF LAND MANA	GEMEN	т	
	OIL	CON. DIV.		FARMINGTON RESOURCE	E AREA		
8. I hereby cer 11	in <mark>வக்குகை</mark> 3. D. Shaw		re Admin	istrative Superviso	or .	ACCEPTED/ FOR RECOR	
(This space for Fed	deral or State offic					OCT 2 1954	
APPROVED BY CONDITIONS OF A	APPROVAL, IF A	TIT	'LE			EADBu.	
						FARMINGUIN RESOURCE ARE	

*See Instructions on Reverse Side

NMOCC a knowingly and willfully to make to any department or agency of the