

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Budget Bureau No. 1004-0145
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
Jicarilla Contract 147

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jicarilla Contract 147

9. WELL NO.

9E

10. FIELD AND POOL, OR WILDCAT

Undes. Gallup/Basin Dakota

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

SW/SE Sec 7, T25N, R5W

12. COUNTY OR PARISH

Rio Arriba

13. STATE

New Mexico

1. OIL ☐ GAS ☒ OTHER ☐

NOV 08 1985

2. NAME OF OPERATOR

Amoco Production Co.

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

3. ADDRESS OF OPERATOR

501 Airport Drive, Farmington, N M 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)

At surface

910' FSL X 1740' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6664'

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) Status Sundry

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well
Completion or Recompletion 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 zones pertinent to this work.)*

The recorded pressures for the month of October 1985 in the Gallup formation are as follows:

Tubing - 1175 psi (Shut-In)

Casing - 954 psi (Shut-In)

RECEIVED
NOV 13 1985
OIL CON. DIV.
DIST. 3

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

SIGNED

B. Shaw

TITLE Adm. Supervisor

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

11-6-85
ACCEPTED FOR RECORD

NOV 12 1985

FARMINGTON RESOURCE AREA

BY sm

*See Instructions on Reverse Side

NMOCC