

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.

RECEIVED  
BLM

99 APR 19 AM 11:28

ALBUQUERQUE, N.M.

RECEIVED

MAY - 6 1999

ON CON. DIV.  
DIST. 3

5. Lease Designation and Serial No.	Jicarilla Contract 148
6. If Indian, Allottee or Tribe Name	Jicarilla Apache
7. If Unit or CA, Agreement Designation	
8. Well Name and No.	Jicarilla Contract 148 #37
9. API Well No.	30-039-23786
10. Field and Pool, or Exploratory Area	West Lindrith Gallup-Dakota
11. County or Parish, State	RIO ARRIBA NEW MEXICO

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	2. Name of Operator AMOCO PRODUCTION COMPANY	Attention: Mary Corley
3. Address and Telephone No. P.O. BOX 3092 Houston, TX 77253	281-366-4491	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 990' FNL 1660' FWL Sec. 13 T 25N R 5W		

12. 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 type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other Well Servicing	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)

Follow up to phone call from your office to Pat Archuleta of our Denver office in February 1999.

4/9/99 MIRU Swab rig and reset a production pit and a separator on this well as the old ones had been removed. The well is heavily loaded with water and oil and will flow a little while after each swab run. Will continue to swab and hopefully return the well to production status.

Should you have any questions please contact me at the number listed above.

Thank you,  
Mary Corley

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

Signed

*Mary Corley*

Title

Senior Business Analyst

Date

04-13-1999

(This space for Federal or State office use)

Approved by

*Dave R. St...*

Title

Lands and Mineral Resources

Date

MAY 4 1999

Conditions of approval, if any: