## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

46. 8º E0*ICB RECEIVED		
PISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR	T	

## OIL CONSERVATION DIVISION

DISTRIBUTION SANTA FE	P. O. BOX 2088  Revised 10- SANTA FE, NEW MEXICO 87501	
FILE	SALLY LINEA MEXICO 87301	5a. Indicate Type of Lease
U.S.G.S.		State Fee X
OPERATOR		5. State Oil & Gas Lease No.
SUNDRY NOTICE	S AND DEPORTS ON WELLS	wall the state of
	S AND REPORTS ON WELLS ILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. IT - (FORM C-101) FOR SUCH PROPOSALS.)	
OIL GAS X OTHER-		7. Unit Agreement Name
Name of Sperator Amoco Production Co.		8. Form or Lease Name
Address of Operator		Jicarilla Gas Com "B" 9. Well No.
501 Airport Drive, Farmington	N M 87401	1
Location of Well		10. Field and Pool, or Wildcat
UNIT LETTER G . 1450 FE	EET FROM THE NOTTH LINE AND 1850 FEET FRO	Otero Chacra/Basin Dakot
THE East LINE, SECTION 31	TOWNSHIP 26N RANGE 5W NMP	
111111111111111111111111111111111111111	5. Elevation (Show whether DF, RT, GR, etc.)	12. County
	6417' KB	Rio Arriba
	e Box To Indicate Nature of Notice, Report or O	
NOTICE OF INTENTION	TO: SUBSEQUE	NT REPORT OF:
ERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
EMPORARILY ASANDON	COMMENCE DRILLING OPHS.	PLUG AND ABANDONMENT
ULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	
OTHER	отния <u>perforate &amp; fra</u>	<u> </u>
work) SEE RULE 1103.	arly state all pertinent details, and give pertinent dates, includi	
Moved in and rigged up service	e unit 4-6-84. Total depth of the well	is 7229' and plug back
.42" in diameter, for a total	he following intervals: 7062'-7080', 70 of 88 holes. Fraced interval 7024' - 1	024' - /050', 2 JSPF, 7080' with 60 270 calc
20# gelled fluid containing 2%	% KCL and 1 gal. surfactant per 1000 gal	ls. with breaker, emulsifie
and 58,000 #20-40 sand.		,
Landed 2-1/16" tubing at 7035'	' and 2-7/8" tubing at 3540'. The rig v	was released as / 2/ 0/
Lancet 2 1710 cabing at 7035	and 2-770 cubing at 3340. The fig (	was released on 4-24-64.
•		
	N	MAY 1 4 1984
	OiL	CONLOW.
		DIST. 3
. I hereby certify that the information above is true	and complete to the best of my knowledge and belief.	
Original Signed By		
D.D. Lawson	TITLE District Adm. Supervisor	DATE 5-9-84
0		400 Å
Original Signed by FRANK T. CHAV	SUPERVISOR DISTRICT # 3	DATE MAY 1 4 1984