

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: September 30, 1990

**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

☐ OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator

**Amoco Production Company** **Melissa Velasco**

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)

**1000' FEL 1750' FSL Sec 25 T26N R6W**

5. Lease Designation and Serial No.

**NMSF-080658**

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

**Reames Com 1E**

9. API Well No.

**30-039-22328**

10. Field and Pool, or Exploratory Area

**Basin (Dakota) DK**

11. County or Parish, State

**San Juan New Mexico**

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

TYPE OF SUBMISSION

- ☒ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

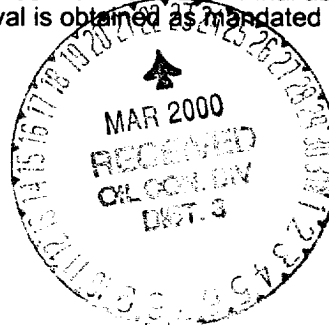
- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other
- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection

**BLM Letter 1/18/2000**

(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.)\*

Amoco Production Company is in the process of obtaining partner approval to plug and abandon the subject well. Plugging procedures are being formulated and will be forwarded to your office for approval upon completion. We anticipate this filing to be completed and filed with your office within 30 days. Final abandonment to commence upon Regulatory approval and when 100% partner approval is obtained as mandated by contract.



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

Signed Melissa Velasco Title **Permitting Staff Assistant**

Date **02/29/00**

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Conditions of approval, if any:

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.

\*See Instructions On Reverse Side