5. LEASE

UNITED STATES

DEPARTMENT OF THE INTERIOR	Jicarilla Apache 102
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
Do not use this form for proposals to drill or to deepen or plug back to a different eservoir. Use Form 9–331–C for such proposals.)	
eservoir. Use norm 9-331-C for such proposals.)	8. FARM OR LEASE NAME
1. oil gas well other	Jicarilla Apache 102
Well Well State	9. WELL NO.
2. NAME OF OPERATOR	12E 10. FIELD OR WILDCAT NAME
Amoco Production Company 3. ADDRESS OF OPERATOR	Basin Dakota
	11. SEC., T., R., M., OR BLK. AND SURVEY OR
501 Airport Drive, Farmington, NM 87401 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA SW/4, SE/4, Section 9,
below)	T26N, R4W
AT SURFACE: 830 FSL x 1700 FEL	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: Same	Rio Arriba NM
AT TOTAL DEPTH: Same	14. API NO.
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	30-039-22458
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
PERMIT FOR ADDROVAL TO CURETOURNE DEPORT OF	7163' GL
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT-OF:	
TEST WATER SHUT-OFF LI LI FRACTURE TREAT []	and the same following
SHOOT OR ACIDIZE	
REPAIR WELL	(NOTE: Report results of multiple confinetion or some
PULL OR ALTER CASING [change on Form 9-330.)
MULTIPLE COMPLETE	
ABANDON*	V 300 3 8
(other) Completion	
TOO THE PROPOSED OF COUNTY TEN OPERATIONS (CL.)	a all maticant datails, and give postinguit datas
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stat including estimated date of starting any proposed work. If well is d	irectionally drilled, give subsurface locations and
measured and true vertical depths for all markers and zones pertinent to this work.)*	
Completion operations commenced on 9-30-80.	Total depth of the well is 8306',
and plug back depth is 8250'. Perforated int	
and 8022-8068' with 2 spf, a total of 186, .4	
174,000 gal of frac fluid, and 441,000# of 20	
at 8221'. Swabbed the well and released the	rig on 10-4-80.
Subsurface Safety Valve: Manu. and Type	Set @ Ft.
18. I hereby certify that the foregoing is true and correct	
	Sunur 11-4-80
Orginal Signed #9 SIGNED E. E. SVOBODA TITLE Dist. Admin.	SUPVIDATE IL-4-00
(This space for Federal or State of	
INCOMES BY	DATE
APPROVED BY	DATE

NMOCC

*See Instructions on Reverse Side