

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Budget Bureau No. 1004-0135  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

Jicarilla Apache 118  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jicarilla Tribe

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jicarilla Apache A 118

9. WELL NO.

13

10. FIELD AND POOL, OR WILDCAT

W. Lindrith Gallup Dakota

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

SE/NW Sec35, T26N, R3W

12. COUNTY OR PARISH 13. STATE

Rio Arriba

NM

OIL WELL ☒ GAS WELL ☐ OTHER ☐

NAME OF OPERATOR

Amoco Production Co.

ADDRESS OF OPERATOR

501 Airport Drive, Farmington, NM 87401

LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*

See also space 17 below.)

At surface

2260' FNL x 1970' FNL

PERMIT NO.

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

7473' GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

ABOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Additional Completion

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

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

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.) \*

Moved in and rigged up service unit on 8-28-85. Landed a 2" x 1-1/4" x 20' pump, 244 3/4" rods and 93 7/8" rods. Released the rig on 8-30-85.

I hereby certify that the foregoing is true and correct

SIGNED

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE Adm. Supervisor

TITLE

DATE 9-6-85

ACCEPTED FOR RECORD

DATE SEP 19 1985

FARMINGTON RESOURCE AREA

BY

\*See Instructions on Reverse Side

NMOCC