

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE
(Other instructions on reverse side)

Bureau Form No. 1000-0105
Expire August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

1. ☐ OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR

Amoco Production Co.

3. ADDRESS OF OPERATOR

2325 E. 30 St., Farmington, NM 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)

At surface

1770' FNL x 610' FEL

RECEIVED

OCT 09 1986

14. PERMIT NO.

15. ELEVATIONS (Show whether or not on ground)

7403' GR

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

5. LEASE DESIGNATION AND SERIAL NO.

Jicarilla Apache All8

6. IF INDIAN ALLOTTEE OR TRIBE NAME

Jicarilla Apache Tribe

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Jicarilla Apache Tribal All8

9. WELL NO.

22

10. FIELD AND POOL, OR WILDCAT

NE Ojito Gallup-Dakota

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

SE/NE Sec. 26, T26N, R3W

12. COUNTY OR PARISH

Rio Arriba

13. STATE

NM

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANE

Extension of APD

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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

17. 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 requests an extension of the Application for Permit to Drill for the subject well.

This Approval is temporary

Expiry Date

4/29/87

OCT 30 1986
OIL
10:00 AM

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

SIGNED

B. S. Shaw

TITLE

Adm. Supervisor

DATE

APPROVED
AS AMENDED

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

OCT 30 1986

CONDITIONS OF APPROVAL, IF ANY:

FOR AREA MANAGER

*See Instructions on Reverse Side

NMOCC