

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.

NM-14915

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Valencia Canyon Unit

8. FARM OR LEASE NAME

9. WELL NO.

23

10. FIELD AND POOL, OR WILDCAT

Choza Mesa Pictured Cliffs

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

NW/NE Sec 15, T28N, R4W

12. COUNTY OR PARISH
Rio Arriba

13. STATE
NM

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 1180' FNL x 1760' FEL

RECEIVED

DEC 23 1986

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

14. PERMIT NO.

15. ELEVATIONS (Show whether dry)
7190' GL

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐

PULL OR ALTER CASING ☐
MULTIPLE COMPLETION ☐
ABANDON* ☐
CHANGE PLANS ☐

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.)

Moved in and rigged up service unit on 12-15-86. Tripped out rods and pump. Spotted a cement plug from 4000'-3721' with 19 cu. ft. Class B with 2% CaCl₂. Spotted a cement plug from 3498'-3359' with 9 cu. ft. Class B with 2% CaCl₂. Spotted a cement plug from 414' to surface with 38 cu. ft. Class B with 2% CaCl₂. Cut off wellhead and erected PxA marker. Released the rig. Plugged and abandoned the subject well on 12-16-86.

Approved by _____
Special Agent in Charge
Surface Management Division

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

SIGNED

BS Shaw

TITLE

Adm. Supervisor

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

DATE 12-18-86

DATE

for Jim A. Lamb

FARM

*See Instructions on Reverse Side

NM000