

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Budget Bureau No. 1004-0135  
Expires 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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME Valencia Canyon Unit
2. NAME OF OPERATOR Amoco Production Co.	8. FARM OR LEASE NAME
3. ADDRESS OF OPERATOR 2325 E. 30 St., Farmington, NM 87401	9. WELL NO. 22
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1530' FNL x 1670' FEL	10. FIELD AND POOL, OR WILDCAT Choza Mesa Pictured Cliffs
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SW/NE Sec 23, T28N, R4W
15. ELEVATIONS (Show whether DT, WT, OR, etc.) 7174' GL	12. COUNTY OR PARISH 13. STATE Rio Arriba NM

RECEIVED

DEC 30 1986

BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
(Other) <input type="checkbox"/>	

(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 12-17-86. Tripped out tubing and displaced hole with drill mud. Set a cement plug from 3945'-3667' with 21 cu. ft. Class B with 2% CaCl<sub>2</sub>. Set cement plug from 3543'-3426' with 9 cu. ft. Class B with 2% CaCl<sub>2</sub>. Pumped plug from 427' to surface with 38 cu. ft. Class B with 2% CaCl<sub>2</sub>. Released the rig. Cut off wellhead and erected a dry hole marker. Plugged and abandoned the well on 12-18-86.

RECEIVED

JAN -2 1987

OIL CON. DIV./  
DIST. 3

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

SIGNED

*B. J. Shaw*

TITLE

Adm. Supervisor

DATE

12-22-86

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*James S. Kelly*

FARMINGTON RESOURCE AREA

\*See Instructions on Reverse Side

NMOCG