

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT - " for such proposals

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator Attention:
Amoco Production Company Lois Raeburn

3. Address and Telephone No.
P.O. Box 800, Denver, Colorado 80201 (303) 830-5294

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
860 FNL 1650 FEL Sec. 1 T 27 R 10W

5. Lease Designation and Serial No.
NMSF-077384

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
Galt E 1

9. API Well No.
3004506932

10. Field and Pool, or Exploratory Area
Fulcher Kutz/Pictured Cliffs

11. County or Parish, State
San Juan New Mexico

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>BLM Request Letter Reply</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

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

13. 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 request continued shut-in status on the above well, to evaluate and compare to testing done one year ago.

RECEIVED
MAY 10 1994
SEE ATTACHED FOR
CONDITIONS OF APPROVAL
OIL CON. DIV.
DIST. 3

THIS APPROVAL EXPIRES AUG 01 1994

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

Signed Lois Raeburn Title Business Asst. Date 02-25-1994

(This space for Federal or State office use)

Approved by _____ Title _____
Conditions of approval, if any:

APPROVED
Date

MAY 6 1994

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent representations as to any matter within its jurisdiction.

* See Instructions on Reverse Side

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UNITED STATES DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT
FARMINGTON DISTRICT OFFICE
1235 LA PLATA HIGHWAY
FARMINGTON, NEW MEXICO 87401

CONDITIONS OF APPROVAL:

This Shut-In approval is contingent upon conducting a casing integrity test and a production verification test by AUG 01 1994. Mark Kelly with the Farmington Office is to be notified at least 48 hours prior to conducting the tests. (505-599-8907) If the casing test fails, you will be required to submit your plans to repair the casing or plug and abandon the well.

Office Hours: 7:45 a.m. to 4:30 p.m.
