

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

5. Lease Designation and Serial No.  
NM-04202

6. If Indian, Alton or Tribe Name

7. Lease Agreement Designation

8. Well Name and No.  
Johnston LS 1

9. API Well No.  
3004507550

10. Field and Pool, or Exploratory Area  
Aztec Pictured Cliffs

11. County or Parish, State  
SAN JUAN NEW MEXICO

**RECEIVED**  
OCT - 1 1998  
**OIL CON. DIV.**  
**DIST. 3**

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator  
AMOCO PRODUCTION COMPANY  
Attention: Pat Archuleta

3. Address and Telephone No.  
P.O. BOX 800 DENVER, COLORADO 80201 (303 830-5217)

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
990' FSL 1700' FWL Sec. 11 T 28N R 9W UNIT N

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" 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 Letter Dated
	<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 will install a wellhead compressor on this well for one month in the 1st quarter of 1999.  
If well does not perform under well head compressor an evaluation we be made at that time to either recomplate or plug and abandon the well.

Reference NMNM-04202 et al (WC0  
3162.3-4 (7400)

RECEIVED  
PLM  
98 SEP 24 AM 9:33  
070 FARMINGTON, NM

THIS APPROVAL EXPIRES MAR 01 1999

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

Signed Pat Archuleta Title Staff Assistant Date 09-23-1998

(This space for Federal or State office use)

Approved by /s/ Duane W. Spencer Title \_\_\_\_\_ Date SEP 28 1998

Conditions of approval, if any: \_\_\_\_\_

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 statements or representations as to any matter within its jurisdiction.

\* See Instructions on Reverse Side

**NMCCD**