Form 3160-5
(June 1990)

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.: SF-078390

6. If Indian, Allottee or Tribe Name:

7. If Unit or CA, Agreement Designation:

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

8. Well Name and No.: Jones A LS #9

2. Name of Operator: Amoco Production Company — Attention: Gail M. Jefferson, Rm 1295C

9. API Well No.: 3004521267

3. Address and Telephone No.: P.O. Box 800, Denver, Colorado 80201 — (303) 830-6157

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

4. Location of Well (Footage, Sec., T., R., M., or Survey Description): 1090FSL 1840FEL Sec. 14 T 27N R 8W Unit O

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	
☐ Notice of Intent	☐ Abandonment	☐ Change of Plans
☒ Subsequent Report	☐ Recompletion	☐ New Construction
☐ Final Abandonment Notice	☐ Plugging Back	☐ Non-Routine Fracturing
	☐ Casing Repair	☐ Water Shut-Off
	☐ Altering Casing	☐ Conversion to Injection
	☒ Other BLM Demand Letter	☐ 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.)*

Please be advised Amoco Production Company will put this well back on production once EPNG compression is turned on.

If you have any questions please contact me at the telephone number listed above.

THIS APPROVAL EXPIRES JAN 01 1996

RECEIVED
JUL 20 1995
OIL CON. DIV.
DIST. 3

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

Signed: Gail M. Jefferson — Title: Sr. Admin. Staff Asst. — Date: 7-26-95

APPROVED
JUL 17 1995
Chip Harraden
for DISTRICT MANAGER

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
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

NMOCD