

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
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"/> 2. NAME OF OPERATOR Amoco Production Company 3. ADDRESS OF OPERATOR 501 Airport Drive Farmington, NM 87401 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 790' FSL X 1680' FWL		5. LEASE DESIGNATION AND SERIAL NO. NM - 035634 6. IF INDIAN, ALLOTTEE OR TRIBE NAME 7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME H. B. McGrady "B" 9. WELL NO. 1E 10. FIELD AND POOL, OR WILDCAT Basin Dakota 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SE/SW Sec. 24, T27N, R12W 12. COUNTY OR PARISH 13. STATE San Juan NM
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, ET, GR, etc.) 5999' GR	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PCLL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Spud and Set Casing <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.)*

Spud a 12-1/4" hole on 10-27-84 at 0500 hrs. Drilled to 336'. Set 8-5/8", 24#, K-55 casing at 336' and cemented with 236 cu. ft. Class B. Circulated cement to surface. Pressure tested casing to 1000 psi. Drilled a 7-7/8" hole to a TD of 6426' on 11-10-84. Set 4-1/2", 10.5#, J-55 casing at 6424'. Stage 1: cemented with 651 cu. ft. Class B 50:50 poz and tailed in with 118 cu. ft. Class B Ideal. Stage 2: cemented with 2541 cu. ft. Class B 65:35 poz. Circulated to surface after both stages. The DV tool was set at 4590' and the rig was released on 11-10-84.

DEC 13 1984
 OIL CON. DIV.
 DIST. 3

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

SIGNED <u>Original Signed By</u> <u>R. D. Shaw</u> (This space for Federal or State office use)	TITLE <u>Adm. Supervisor</u>	DATE <u>11-19-84</u>
APPROVED BY _____	TITLE _____	DATE <u>07 1984</u>

ACCEPTED FOR RECORD

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

BY SM