Form 3160-5 (December 1989)

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

FORM APPROVED Budget Bureau No. 1004-0135 Expires: September 30, 1990

5. Lease Designation and Serial No.

## SF-078902-A

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

SUBMIT IN TRIPLICATE

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

| 1. Type of Well OIL WELL GAS WELL OTH  | ER  | Gaffegos Canyon Canyon                                   |
|--|---|--|
| 2. Name of Operator  Amoco Production Company Attn: Melissa Velasco-Price  |   | 9. API Well No.<br>30-045-26103                          |
| 3. Address and Telephone No.  P.O. Box 3092 Houston, TX 77253 (281) 366-2548   |   | 10. Field and Pool, or Exploratory Area  Pictured Cliffs |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)   |   | 11. County or Parish, State                              |
| 790' FNL & 1600' FWL Sec 09 T27N R12W Unit C   |   | San Juan New Mexico                                      |
| 12. CHECK APPROPRIATE BOX(s  | ) TO INDICATE NATURE OF NOTICE, REP                         | ORT, OR OTHER DATA                                       |
| TYPE OF SUBMISSION   | TYPE OF ACT   | ION  |
| X Notice of Intent   | Abandonment   | Change of Plans  |
|  | Recompletion  | New Construction   |
| Subsequent Report  | Plugging Back   | Non-Routine Fracturing                                   |
| Final Abandonment Notice   | Casing Repair   | Water Shut-Off   |
|  | Altering Casing   | Conversion to Injection                                  |
|  | Other BLM Letter 6-20-00                                    |  |
|  |   | e completion on Well Completion or                       |
| Recompletion Report and Log form.)  3. Describe Proposed or Completed Operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed  |   |  |
|  | NPROVAL EXPIRES FEB 0 1 20                                  | JUL 2000 RECEIVED ON DIV DIST: 3                         |
| 14. I hereby certify that the foregoing is true and correspond to the signed Si | Ct  Title Permitting Assistant                              | Date   |
| (This space for Federal or State office use)   |   |  |
| Approved by Conditions of approval, if any:  | Title   | Date 7/24/00   |
| Title 18 U.S.C. Section 1001, makes it a crime for any or fraudulent statements or representations as to any ma  | person knowingly and willfully to make to any department of | agency of the United States any false, fictitious        |

\*See Instructions On Reverse Side