

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Budget Bureau No. 1004-0115  
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or to be drilled. Use "APPLICATION FOR PERMIT" for such proposals.)

RECEIVED

SF-077941-A

IF INDIAN, ALLOTTEE OR TRIBE NAME

UNIT AGREEMENT NAME

FARM OR LEASE NAME

C. A. McAdams B

WELL NO.

2E

FIELD AND POOL, OR WILDCAT  
Basin Dakota/  
Angel Peak Gallup

SEC. T. R. M. OR BLK. AND  
SURVEY OF AREA

NW/NE Sec 28, T27N, R10W

COUNTY OR PARISH  
San Juan

STATE  
New Mexico

OIL WELL ☐ GAS WELL ☒ OTHER

OCT 24 1985

NAME OF OPERATOR

Amoco Production Co.

BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

ADDRESS OF OPERATOR

501 Airport Drive, Farmington, N M 87401

LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)  
At surface

795' FNL X 1795' FEL

PERMIT NO.

ELEVATIONS (Show whether OF, RT, GR, etc.)

6305' GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) Supplemental

RELL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

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

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 Co. is currently testing the Gallup formation of the subject well. When a GOR test is obtained, a Well Completion Report (form 3160-4) and a Multiple Completion Application (form C-107) will be forwarded to the appropriate offices.

RECEIVED  
OCT 30 1985  
OIL CONTROL  
DISTRICT

I hereby certify that the foregoing is true and correct

SIGNED B. D. Shaw

TITLE Adm. Supervisor

DATE 10-18-85

(In space for Federal or State office use)

APPROVED BY

TITLE

DATE ACCEPTED FOR RECORD

CONDITIONS OF APPROVAL, IF ANY:

OCT 25 1985

\*See Instructions on Reverse Side

NMOCC

FARMINGTON RESOURCE AREA

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

