

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-077384

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Kutz Federal J #2E

9. API Well No.

3004529114

10. Field and Pool, or Exploratory Area

Basin Dakota

11. County or Parish, State

San Juan New Mexico

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

2. Name of Operator

Amoco Production Company

Attention:

Gail M. Jefferson, Rm 1295C

3. Address and Telephone No.

P.O. Box 800, Denver, Colorado 80201

(303) 830-6157

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1650FSL

1110FEL

Sec. 6 T 27N R 10W

Unit I

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

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Reinstatement APD

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ 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 still intends to drill the subject well and would like to request that the Application for Permit to Drill approved 5/5/94 and extended until November 5, 1995, be extended beyond the November 5, 1995 expiration date.

OCT 13 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

10-09-1995

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

APPROVED

OCT 12 1995

DISTRICT MANAGER

* See Instructions on Reverse Side

NMOCD