

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 RECEIVED

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.
NMSF078566

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
Storey LS#8(PC) Storey LS#1A (mv)

9. API Well No.
30-045-21077 (PC)
30-045-29248 (MV) ✓

10. Field and Pool, or Exploratory Area
Blanco PC South, Blanco Mts. side

11. County or Parish, State
San Juan, NM

97 MAR 11 PM 1:23
070 FARMINGTON, NM

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
Amoco Production Company Attention: Mark Stelling (505) 326-9432

3. Address and Telephone No.
200 Amoco Court, Farmington NM 87401 (505) 326-9432

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SW1/4 NW1/4 Sec. 27 T28N R8W

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Commingled Well Test</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

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

RECEIVED
JUN - 3 1997
OIL CON. DIV.
DIST. 3

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.)*

Per NMOC order PC-934, please accept this sundry notice as the required quarterly well test notification. The test was completed 2/23/97 and allocations will reflect these results.

Well Name	Formation	Gas Production	%	Oil Production	%
Storey LS #8	PC	26	8.9%	0	0%
Storey LS #1A	MV	266	91.1%	.5	100%
Total		292	100%	.5	100%

cc: Wellfiles: Storey LS #8(PC) + Storey LS #1A (mv)

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

Signed: Mark Stelling Title: Business Analyst

(This space for Federal or State office use)

ACCEPTED FOR RECORD 2/1/97

Approved by _____ Title _____

Conditions of approval, if any: _____

MAY 29 1997

FARMINGTON DISTRICT OFFICE