Form 3160-5

	UNITED STATE EPARTMENT OF THE I	NTERIOR	OMB	FORM APPROVED OMB NO. 1004-0135 Expires: November 30, 2000	
BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an			10 10 5. Lease Serial No.		
abandoned w	ell. Use form 3160-3 (AF	D) for such protesals.	If Indian, Allottee	or Tribe Name	
SUBMIT IN TR	PIPLICATE - Other instru	ctions on reverse side	1 If Unit or CA/Agr	eement, Name and/or No.	
Type of Well Oil Well	ther	CO OIL O	ya, won mante and me	8. Well Name and No. GALLEGOS CANYON UNIT 174	
Name of Operator AMOCO PRODUCTION CO	Contact: MPANY	CHERRY HLAVA E-Mail: hlavacl@toccom	9. API Well No. 30-045-07165		
3a. Address P.O. BOX 3092 HOUSTON, TX 77253		3b. Phone No. (include area code) Ph: 281.366.4081 Fx: 281.366.0700 10. Field and Pool, or Exploratory 71599		r Exploratory	
4. Location of Well (Footage, Sec.,	11. County or Parish	11. County or Parish, and State			
Sec 28 T28N R12W Mer NE	SAN JUAN CC	SAN JUAN COUNTY, TX			
12. CHECK APP	ROPRIATE BOX(ES) TO	O INDICATE NATURE OF 1	NOTICE, REPORT, OR OTHE	ER DATA	
TYPE OF SUBMISSION		ТҮРЕ О	ACTION		
Notice of Intent ■	☐ Acidize	☐ Deepen	☐ Production (Start/Resume)	☐ Water Shut-Off	
☐ Subsequent Report	☐ Alter Casing	☐ Fracture Treat	☐ Reclamation	■ Well Integrity	
	☐ Casing Repair	☐ New Construction	☐ Recomplete ☐ Other		
☐ Final Abandonment Notice	☐ Change Plans	Plug and Abandon	☐ Temporarily Abandon		
	☐ Convert to Injection	☐ Plug Back	□ Water Disposal		
following completion of the involve	nally or recomplete horizontally, ork will be performed or provided operations. If the operation relation had be filed.	give subsurface locations and measure the Bond No. on file with BLM/BIA sults in a multiple completion or reco	g date of any proposed work and appropriated and true vertical depths of all pertical depths of a form 31 ling reclamation, have been completed,	nent markers and zones. e filed within 30 days	
THIS WELL HAS BEEN EVA	LUATED AND WILL BE F	LUGGED THE 2nd QUARTE	R OF 2002		
IF YOU HAVE ANY QUESTI	ONS PLASE CONTACT:	CHERRY HLAVA 281-366-40	981		

14. I hereby certify that the foregoing is true and correct. Electronic Submission #4791 verified b For AMOCO PRODUCTION COM Committed to AFMSS for processing b	PANY, sent to t	he Farmington				
Name (Printed/Typed) CHERRY HLAVA	itle AUTHORIZED REPRESENTATIVE					
Signature	Date 06/06/2	001				
THIS SPACE FOR FEDERAL OR STATE OFFICE USE						
_Approved By	Title		Date			
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office	-				

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.



