

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-078904
9200084

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Attention:

AMOCO PRODUCTION COMPANY

Lois Raebrun

3. Address and Telephone No.

P.O. Box 300, Denver, Colorado 80201

(303) 830-5294

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

790 FSL

1060 FWL

Sec. 23 T 28N R 12W

8. Well Name and No.

Gallegos Canyon Unit 230

9. API Well No.

3004511628

10. Field and Pool, or Exploratory Area

Basin Dakota

11. County or Parish, State

San Juan

New Mexico

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

TYPE OF SUBMISSION

TYPE OF ACTION

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

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

- ☐ 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 request permission to plug well bore to reduce water production and return well to a productive status.

See attached.

If you have any questions please call Lois Reaburn @ (303) 830-5294

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DIST. 3

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

Signed

Lois Reaburn

Title

Business Asst.

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

APPROVED
MAY 13 1994

Title 18 U.S.C. Section 1001, makes 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.

* See Instructions on Reverse

NMOOD

WELL REPAIR AUTHORIZATION AND REPORT

ORIGINAL BLANK	
CORRECTION 6	
DELETION 9	
FLAC (WELL) NO.	
HORIZON CODE	
CONTROL DATE	
MO. DAY YR.	

LEASE/UNIT NAME AND WELL NUMBER <i>Gallegos Canyon Unit 230</i>		HORIZON NAME <i>Dakota</i>	
FIELD <i>Basin Dakota</i>	COUNTY <i>Santa Juan</i>	STATE <i>NM</i>	
OPERATOR <i>Amoco</i>	OPERATIONS CENTER/DIVISION <i>550C/SRBU</i>	ELEVATION <i>GL 5728'</i>	ELE. REFERENCE PT. <i>KB 5742</i>
LAST PRODUCING WELL ON LEASE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		T.D. <i>6260</i>	LOCATION <i>Sec 23-T28N-R12W</i>
Amoco WORKING INTEREST <i>0.562</i>		OTHER WORKING INTERESTS	
Amoco NET INTEREST <i>0.457</i>		TOTAL REPAIR HORIZONS <input checked="" type="checkbox"/>	STATUS AFTER REPAIR PRODUCING <input checked="" type="checkbox"/> INJECTION <input type="checkbox"/>
		PRODUCTION INCREASE EXPECTED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	

TYPE JOB SELECT ONE MAJOR (1) AND MAXIMUM THREE MINOR (2)				ESTIMATED COST																																				
<table border="0"><tr><td>1. CONVERT TO INJECTION .. <input type="checkbox"/></td><td>2. CONVERT TO PROD. <input type="checkbox"/></td><td>3. DEEPEN <input type="checkbox"/></td><td colspan="2">INTANGIBLES</td></tr><tr><td>4. WATER FRAC <input type="checkbox"/></td><td>5. OIL FRAC <input type="checkbox"/></td><td>6. ACID FRAC <input type="checkbox"/></td><td colspan="2">RIG COST \$ <i>6000</i></td></tr><tr><td>7. ACIDIZE <input type="checkbox"/></td><td>8. REPAIR CASING <input type="checkbox"/></td><td>9. WHIPSTOCK <input type="checkbox"/></td><td colspan="2">EQUIPMENT RENTAL</td></tr><tr><td>10. PLUG BACK <input checked="" type="checkbox"/></td><td>11. PERFORATE <input type="checkbox"/></td><td>12. CEMENT SQUEEZE <input type="checkbox"/></td><td colspan="2">CIRCULATING MEDIA <i>1000</i></td></tr><tr><td>13. WASHING SAND <input type="checkbox"/></td><td>14. SAND CONTROL <input type="checkbox"/></td><td>15. OTHER <input type="checkbox"/></td><td colspan="2">CEMENT AND SERVICE</td></tr><tr><td>16. SET LINER OR SCREEN ... <input type="checkbox"/></td><td>17. PULL LINER OR SCREEN ... <input type="checkbox"/></td><td></td><td colspan="2">PACKERS AND EQUIPMENT</td></tr><tr><td>18. TREATING VOLUME - GAL. <input type="text"/></td><td colspan="2">DIVISION REPAIR CODE <input type="text"/></td><td colspan="2">PERFORATE, LOG, WIRELINE <i>1000</i></td></tr></table>				1. CONVERT TO INJECTION .. <input type="checkbox"/>	2. CONVERT TO PROD. <input type="checkbox"/>	3. DEEPEN <input type="checkbox"/>	INTANGIBLES		4. WATER FRAC <input type="checkbox"/>	5. OIL FRAC <input type="checkbox"/>	6. ACID FRAC <input type="checkbox"/>	RIG COST \$ <i>6000</i>		7. ACIDIZE <input type="checkbox"/>	8. REPAIR CASING <input type="checkbox"/>	9. WHIPSTOCK <input type="checkbox"/>	EQUIPMENT RENTAL		10. PLUG BACK <input checked="" type="checkbox"/>	11. PERFORATE <input type="checkbox"/>	12. CEMENT SQUEEZE <input type="checkbox"/>	CIRCULATING MEDIA <i>1000</i>		13. WASHING SAND <input type="checkbox"/>	14. SAND CONTROL <input type="checkbox"/>	15. OTHER <input type="checkbox"/>	CEMENT AND SERVICE		16. SET LINER OR SCREEN ... <input type="checkbox"/>	17. PULL LINER OR SCREEN ... <input type="checkbox"/>		PACKERS AND EQUIPMENT		18. TREATING VOLUME - GAL. <input type="text"/>	DIVISION REPAIR CODE <input type="text"/>		PERFORATE, LOG, WIRELINE <i>1000</i>		STIMULATION	
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1. GROSS PRODUCTION				LABOR																																				
OIL BOPD <input type="text"/>				SPECIAL EQUIPMENT <i>1000</i>																																				
WATER BWPD <input type="text"/>				FISHING																																				
GAS MCFD <i>0</i>				OTHER INTANGIBLES <i>1000</i>																																				
OTHER /DAY <input type="text"/>				TOTAL INTANGIBLES \$ <i>19000</i>																																				
EXPECTED PAYOUT <i>4.6</i> MONTHS				TANGIBLES																																				
2. GROSS INJECTION				CSG, TBG, HEAD, ETC. \$ <i>0</i>																																				
WATER <input type="checkbox"/> GAS <input type="checkbox"/> LPG <input type="checkbox"/> AIR <input type="checkbox"/> STEAM <input type="checkbox"/> OTHER <input type="checkbox"/>				TOTAL GROSS COST \$ <i>10000</i>																																				
RATE BPD OR MCFD <input type="text"/>				Amoco																																				
PRESSURE PSIG <input type="text"/>				WORKING INTEREST COST \$ <i>5620</i>																																				

REASON FOR WORK

Plug back wellbore to reduce water production and return well to a productive status.

1. Set CIBP at 6160' and cap with 1 Sack of Class B neat cement.

2. TIT with standard 2 3/8" tbg. Land intake at 6100'.

3. Swab well in and RTP.

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Notice To Nonoperator: Costs shown on this form are estimates only. Nonoperators should not consider these estimates as establishing any limit on monies which will be required to perform the proposed operation.

Nonoperator _____
By _____ Date _____

REPAIR RESULT DATE REPAIR COMPLETED GROSS PRODUCTION DURING PAYOUT OIL BOPD WATER BWPD GROSS INJECTION RATE BPD OR MCFD ESTIMATED FINAL GROSS COST	SUCCESS <input type="checkbox"/> FAILURE <input type="checkbox"/> MO. ____ DAY ____ YR. ____ OIL BOPD WATER BWPD OTHER /DAY RATE BPD OR MCFD PRESSURE PSIG \$	RECOMMENDED DATE <i>Steven B. Smethrie</i> <i>4/18/94</i> AUTHORIZED <i>Steven B. Smethrie</i> MO. ____ DAY ____ YR. ____
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