(other)

## UNITED STATES

APD Extension

UNITED STATES	5. LEASE	
DEPARTMENT OF THE INTERIOR	I-149-IND-8476	
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
	Navajo Tribe	
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME	
	Gallegos Canyon Unit	
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME	
1. oil gas gy		
well gas well other	9. WELL NO.	
2. NAME OF OPERATOR	85E	
Amoco Production Company	10. FIELD OR WILDCAT NAME	
3. ADDRESS OF OPERATOR	Basin Dakota	
501 Airport Drive, Farmington, NM 87401	11. SEC., T., R., M., OR BLK. AND SURVEY OR	
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	AREA NE/SE, Section 19, T28N,	R12W
AT SURFACE: 1550' FSL x 840' FEL	12. COUNTY OR PARISH 13. STATE	
AT TOP PROD. INTERVAL: Same	San Juan New Mexico	
AT TOTAL DEPTH: Same	14. API NO.	
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	30-045-25169	
REPORT, OR OTHER DATA	1. ELLVATIONS (SHOW DF, KDB, AND WD)	
REQUEST FOR APPROVAL TO:  TEST WATER SHUT-OFF  TENANTINE TREAT	5863' GL	
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	-0	
TEST WATER SHUT-OFF	983	
TEST WATER SHUT-OFF SHOOT OR ACIDIZE REPAIR WELL SUBSEQUENT REPAIR SUBSEQUENT S	, cd	
REPAIR WELL	SHOTE: Report results of multiple completion or zone	
PULL OR ALTER CASING \( \square\)	change on Form 9-330.)	
MULTIPLE COMPLETE   GEOLOGY  GEOLOGY		
REPAIR WELL  PULL OR ALTER CASING  MULTIPLE COMPLETE  CHANGE ZONES  ABANDON*  W. SEARMING OF CHANGE ZONES		
ABANDON*		

17. 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 requests an extension on the above named well as the approval expires 2-28-83. Amoco would like to drill this well by March 31, 1983 but is having a problem obtaining NIIP right-of-way approval.

extuded 8-28-83

Subsurface Safety Valve: Manu. and Type	e	Set @ F
18. I hereby certify that the foregoing is		
SIGNED Original Vigano Sy  B.T. Quinarious	TITLE Admin. Supvr.	DATE 1/28/83
Difference of the second of th	(This space for Federal or State office u	se)
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	AS AMENDED
		MAR-01, 1983

\*See Instructions on Reverse Side

DISTRICT ENGINEER