5. LEASE

UNITED STATES

DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY	I-149-IND-8470
	6. IFINDIAN, ALLOTTEE OR TRIBE NAME Navajo Tribe
SUNDRY NOTICES AND REPORTS ON WELLS (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.) 1. oil gas well other	7. UNIT AGREEMENT NAME Gallegos Canyon Unit
	8. FARM OR LEASE NAME
	9. WELL NO.
2. NAME OF OPERATOR Amoco Production Company	192E 10. FIELD OR WILDCAT NAME
3. ADDRESS OF OPERATOR	Basin Dakota
501 Airport Dr., Farmington, NM 87401 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NE/4, NE/4, Section 30 T28N, R12W
AT SURFACE: 800' FNL x 1110' FEL AT TOP PROD. INTERVAL: Same AT TOTAL DEPTH: Same	12. COUNTY OR PARISH 13. STATE San Juan NM
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	14. API NO. 30-045-25172
	15. ELEVATIONS (SHOW DF, KDB, AND WD) 5716' GL
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE SUBSEQUENT REPORT OF:	
REPAIR WELL PULL OR ALTER CASING	(NOTE: Report results of multiple completion or zone change on Form 9-330.)
PULL OR ALTER CASING	Marine de la companya del companya de la companya del companya de la companya de
(other) APD Extension	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is determined to the complete of	all pertinent details, and give pertinent dates,

measured and true vertical depths for all markers and zones pertinent to this work.)*

Amoco Production Company requests an extension of approval of drilling as the approval expires 8-28-82. Our plans call for drilling this well in 1982providing right-of-way problems can be worked out with the Navajo Tribe.

extended to 2/28/83 Subsurface Safety Valve: Manu. and Type _ 18. I hereby certify that the foregoing is true and correct Original Signed By TITLE Dist. Engineer 7-28-82 D. H. SHOEMAKER (This space for Federal or State office use) APPROVED BY

*See Instructions on Reverse Side

NMOCC

CONDITIONS OF APPROVAL, IF ANY: