PISTRICT ENGINEER

5. LEASE

## UNITED STATES

DEPARTMENT OF THE INTERIOR	I-149-IND-8470
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
decedione comme	Navajo Tribal
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(Do not use this form for proposals to drill or to deepen or plug back to a different	Gallegos Canyon Unit
(Do not use this form 9–331–C for such proposals.)	8. FARM OR LEASE NAME
1. oil gas XX other	9. WELL NO.
2. NAME OF OPERATOR	193E
Amoco Production Company	10. FIELD OR WILDCAT NAME Basin Dakota
3. ADDRESS OF OPERATOR	
501 Airport Drive, Farmington, NM 87401	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SW/SW, Section 30, T28N, R12
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	THEN DAY BUSINESS OF THE PROPERTY OF THE PROPE
below.) AT SURFACE: 830' FSL x 970' FWL	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,	30-045-25173
REPORT, OR OTHER DATA	THE PLENATIONS COLON DE VOD AND WOL
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF	
TEST WATER SHUT-OFF	
FRACTURE TREAT	(NOTE Report results of multiple completion or zone SUM. change on Form 9–330.)
SHOOT OR ACIDIZE U GROWN SHOOT OR ACIDIZE U GROWN GROW	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	change on Form 9-330.)
MULTIPLE COMPLETE	Chi 4.
CHANGE ZONES	7.
ABANDON* (other) APD Extension U. Single Apple (in the control of	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stational including estimated date of starting any proposed work. If well is measured and true vertical depths for all markers and zones pertined Amoco Production Company requests an extensi approval expires 2-28-83. Amoco plans on dr	on on the above-named well as the
extended to 8-	
	¥ . *
	and the state of t
	OIL COMMENT
	DIST. C
Subsurface Safety Valve: Manu. and Type	Šet @ Ft.
18 I hereby certify that the foregoing is true and correct	
Original Street Street Admin. Supv	vr1-28-83
(This space for Federal or State	office use)
APPROVED BY TITLE	DATE DEPONE
CONDITIONS OF APPROVAL, IF ANY:	
	AS AMENDED
	MARA 1 1007
*See Instructions on Revers	is Side
"See High our version	ニーニー・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・