

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

EXPIRES DATE: AUG. 31, 1985  
Expires August 31, 1985

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 "APPLICATION FOR PERMIT—" for such proposals.)

|                                                                                                                                                                 |  |                                                                                 |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------|--|
| 1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER                                                |  | 5. LEASE DESIGNATION AND SERIAL NO.<br>SF-080844                                |  |
| 2. NAME OF OPERATOR<br>Amoco Production Co.                                                                                                                     |  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                                            |  |
| 3. ADDRESS OF OPERATOR<br>501 Airport Drive, Farmington, N M 87401                                                                                              |  | 7. UNIT AGREEMENT NAME                                                          |  |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br>790' FSL x 1160' FWL |  | 8. FARM OR LEASE NAME<br>T. L. Rhodes "B"                                       |  |
| 14. PERMIT NO.                                                                                                                                                  |  | 9. WELL NO.<br>1E                                                               |  |
| 15. ELEVATIONS (Show whether OF, ST, GR, etc.)<br>5724' GR                                                                                                      |  | 10. FIELD AND POOL, OR WILDCAT<br>Pinon Basin Dakota/Gallup                     |  |
|                                                                                                                                                                 |  | 11. SEC., T., R., M., OR BLK. AND<br>SURVEY OR AREA<br>sw/sw Sec 20, T28N, R11W |  |
|                                                                                                                                                                 |  | 12. COUNTY OR PARISH<br>San Juan                                                |  |
|                                                                                                                                                                 |  | 13. STATE<br>NM                                                                 |  |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
(Other) Status Sundry

PELL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
ABANDON\* ☐  
CHANGE PLANS ☐

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐  
FRACTURE TREATMENT ☐  
SHOOTING OR ACIDIZING ☐  
(Other) ☐

REPAIRING WELL ☐  
ALTERING CASING ☐  
ABANDONMENT\* ☐

(NOTE: Report results of multiple completion on Well Completion or Recoupletion Report and Log form.)

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 wishes to inform you that the Pinon Gallup formation for the subject well will not be completed until working interest owner approval has been received.

RECEIVED  
MAR 26 1985  
BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA  
APR 05 1985  
OIL CO. OF CALIF.  
DICKSON

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

SIGNED

Original Signed By  
B. D. Shaw

TITLE Adm. Supervisor

DATE

ACCEPTED FOR RECORD

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

APR 03 1985

CONDITIONS OF APPROVAL, IF ANY:

FARMINGTON RESOURCE AREA

BY

\*See Instructions on Reverse Side

NMOCC