

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Budget Bureau No. 1004-0135
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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. SF-080844
2. NAME OF OPERATOR Amoco Production Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 501 Airport Drive Farmington, NM 87401	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 790' FSL X 1160' FWL	8. FARM OR LEASE NAME T. L. Rhodes "B"
RECEIVED JAN 11 1985	9. WELL NO. 1E
	10. FIELD AND POOL, OR WILDCAT Basin Dakota/Pinon Gallup
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SW/SW Sec. 20, T28N, R11W
14. PERMIT NO.	15. ELEVATIONS (Show whether DP, ST, GR, etc.) 5724' GR
12. COUNTY OR PARISH San Juan	13. STATE NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
(Other) Spud and Set Casing	

(NOTE: Report results of multiple completion on Well Completion or Recompletion 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.)*

Spud a 12-1/4" hole on 12-14-84 at 1945 hrs. Drilled to 310'. Set 9-5/8", 36#, K-55 casing at 310' and cemented with 330 cu. ft. Class B, 2%, CaCl₂. Circulated cement to surface. Pressure tested casing to 1000 psi. Drilled an 8-3/4" hole to a TD of 6323' on 12-23-84. Set 7", 23#, K-55 casing at 6323'. Stage 1: cemented with 512 cu. ft. Class B 65:35 poz and tailed in with 472 Cu. ft. Class B Neat. Stage 2: cemented with 1359 cu. ft. Pozzolan 65:35. Circulated to surface after both stages. The DV tool was set at 3001' and the rig was released on 12-24-84.

RECEIVED
FEB 20 1985
OIL CON. DIV.
DIST. 3

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

SIGNED Original Signed By
B. D. Shaw

TITLE Admin. Supervisor

DATE 1-5-85

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE FEB 05 1985

FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side

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