

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 2. NAME OF OPERATOR Amoco Production Co. | | 3. ADDRESS OF OPERATOR 501 Airport Drive, Farmington, N M 87401 | | 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1080' FSL x 1110' FEL | | 5. PERMIT NO. | | 6. ELEVATIONS (Show whether DF, RT, CR, etc.) 5979' GR | | 7. LEASE DESIGNATION AND SERIAL NO. SF-077967 | | 8. IF INDIAN, ALLOTTEE OR TRIBE NAME | | 9. UNIT AGREEMENT NAME Gallegos Canyon Unit | | 10. FARM OR LEASE NAME | | 11. WELL NO. 90E | | 12. FIELD AND POOL, OR WILDCAT BasinDK/ChaChaGLPExt. | | 13. SEC., T., R., E., M., OR BLK. AND SURVEY OR AREA SE/SE Sec35, T28N, R13W | | 14. COUNTY OR PARISH San Juan | | 15. STATE NM | |
|--|--|---|--|--|--|--|--|---------------|--|---|--|--|--|--------------------------------------|--|--|--|------------------------|--|---------------------|--|---|--|---|--|----------------------------------|--|-----------------|--|

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

| NOTICE OF INTENTION TO: | | | | SUBSEQUENT REPORT OF: | | | |
|-------------------------|--------------------------|----------------------|--------------------------|-----------------------|-------------------------------------|-----------------|--------------------------|
| TEST WATER SHUT-OFF | <input type="checkbox"/> | PULL OR ALTER CASING | <input type="checkbox"/> | WATER SHUT-OFF | <input type="checkbox"/> | REPAIRING WELL | <input type="checkbox"/> |
| FRACTURE TREAT | <input type="checkbox"/> | MULTIPLE COMPLETE | <input type="checkbox"/> | FRACTURE TREATMENT | <input type="checkbox"/> | ALTERING CASING | <input type="checkbox"/> |
| SHOOT OR ACIDIZE | <input type="checkbox"/> | ABANDON* | <input type="checkbox"/> | SHOOTING OR ACIDIZING | <input type="checkbox"/> | ABANDONMENT* | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> | CHANGE PLANS | <input type="checkbox"/> | (Other) Completion | <input checked="" type="checkbox"/> | | |

(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.)*

Moved in and rigged up service unit on 3/6/85. Total depth of the well is 6399' and plugback depth is 6354'. Pressure tested production casing to 3400 psi for 30 minutes. Perforated the following Dakota intervals: 6178'-6236', 6136'-6164', 8 jspf .50" in diameter, for a total of 688 holes. Fraced Dakota interval 6136'-6236' with 100,000 gal 70 quality foam and 160,000 # 20-40 sand.

Landed 2-3/8" tubing at 6260' and released the rig on 3/18/85.

I hereby certify that the foregoing is true and correct

SIGNED BDS Shaw TITLE Adm. Supervisor DATE 4/24/85

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side