

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 a well and do not use for proposals to alter a well. Use "APPLICATION FOR PERMIT" for such proposals.)

RECEIVED

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		2. NAME OF OPERATOR Amoco Production Co.		3. ADDRESS OF OPERATOR 501 Airport Drive, Farmington, N M 87401		4. PERMIT NO.		5. ELEVATIONS (Show whether DF, RT, GR, etc.) 5842' GR		6. LEASE DESIGNATION AND SERIAL NO. SF-077967		7. IF INDIAN, ALLOTTEE OR TRIBE NAME		8. UNIT AGREEMENT NAME		9. FARM OR LEASE NAME Gallegos Canyon Unit		10. WELL NO. 137E		11. FIELD AND POOL, OR WILDCAT Basin Dk/ChaCha Gallup Ext		12. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SW/SW Sec 36, T28N, R13W		13. COUNTY OR PARISH San Juan		14. STATE NM	
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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) Supplement Sundry

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

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 Recompletion Report and Log form.)

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.)*

The subject well will be dually completed with two separate strings of tubing. The Gallup formation will not be completed until both working interest owner approval and gas sales marketing have been obtained. The pipeline is waiting to connect the Dakota formation to gas sales.

RECEIVED
SEP 11 1985
OIL CON. DIV.
DIST. 3

I hereby certify that the foregoing is true and correct

SIGNED B. S. Shaw TITLE Adm. Supervisor

DATE 9-3-85

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side