

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Section No. NMSF 8938	
2. Name of Operator AMOCO PRODUCTION COMPANY		6. If Indian, Name of Tribe	
3a. Address P.O. BOX 3092 HOUSTON, TX 77253		7. If Unit, Name and/or No.	
3b. Phone No. (include area code) Ph: 281.366.4491 Fx: 281.366.0700		8. Well Name TRIGGER	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 15 T29N R9W NESE 2105FSL 845FEL		9. API Well No. 30-045 864	
		10. Field or Exploratory BASIN KOTA/BLANCO MESAVE	
		11. County, Parish, and State SAN JUAN COUNTY, NM	

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Re)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Aband	Subsurface Commi
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	ng

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depth. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Amoco Production Company request permission to add a completion in the Blanco Mesaverde Pool and commingle production downhole with the existing Basin Dakota Pools as per the attach procedure.

Authority to downhole commingle production was granted for the subject well under NMOCD DHC - 2347 issued 06/03/1999 and BLM approval granted 06/10/1999. Approved downhole commingling allocation factors were:
Mesaverde 78% Gas & 8% Oil and Dakota 22% Gas & 92% Oil.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #8722 verified by the BLM Well Information System For AMOCO PRODUCTION COMPANY, sent to the Farmington Committed to AFMSS for processing by Lucy Bee on 11/15/2001 ()	
Name (Printed/Typed) MARY CORLEY	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 11/08/2001

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By <u>/s/ Jim Lovato</u>	Title
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

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NMOCD

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Trigg Federal GC B #1 Recompletion Procedure

1. Check anchors. MIRU workover rig.
2. Check and record tubing, casing, and bradenhead pressures.
3. Blow down well. Kill with 2% KCL water ONLY if necessary.
4. Nipple down WH. NU BOPs.
5. Tag for fill and tally OH with 2-3/8" production tubing currently set at 7526'.
6. TIH with bit and scraper for 4-1/2" casing to 5750'.
7. RU WL unit. RIH with 4-1/2" wireline-set CIBP. Set CIBP at 5750'. Load hole with 2% KCL.
8. Run CBL over MV interval (4450' - 5750') to ensure zonal isolation across the A.
9. Pressure test casing to 2500 psi
10. RIH with 3-1/8" casing guns. Perforate Lower Menefee/Point Lookout formation
5204', 5210', 5250', 5256', 5262', 5270', 5275', 5288', 5296', 5302', 5308', 5318',
5322',
5330', 5338', 5340', 5350', 5356', 5364', 5372', 5378', 5389', 5407', 5433', 5440',
5462',
5480', 5501', 5541', 5560', 5596', 5628', 5647'
11. RU frac equipment and install wellhead isolation tool. Use 2% KCL-N2 foam in fracture stimulation.
12. Spearhead 500 gal 15% HCL, establish injection rate, and proceed with fracture stimulation according to Schlumberger schedule
13. Immediately after frac job, RU WL unit and lubricator.
14. RIH and set CIBP between Upper Menefee and Lower Menefee at 5115'.
15. RIH with 3-1/8" casing guns. Perforate Menefee formation.
4590', 4600', 4606', 4628', 4657', 4684', 4690', 4693', 4703', 4710', 4720', 4730',
4738', 4753', 4760', 4765', 4780', 4784', 4836', 4868', 4885', 4894', 4951', 4960',
5005', 5028', 5043', 5070', 5078', 5098'
16. RU frac equipment and install wellhead isolation tool. Use 2% KCL/N2 foam in fracture stimulation.
17. Spearhead 500 gal 15% HCL, establish injection rate, and proceed with fracture stimulation according to Schlumberger schedule.
18. Flowback frac immediately.
19. TIH with tubing and bit. Cleanout fill and drill bridge plugs set at 5115' and 5750'.
Cleanout fill to PBTD at 7560'. Blow well dry at PBTD.
20. Rabbit tubing and RIH with 2-3/8" production tubing. Land 2-3/8" tubing at 7555'.
21. ND BOP's. NU WH. Test well for air. Return well to production and downhole commingle MV and DK production.





Trigg Federal GC B #1

Sec 15, T29N, R9W

API #: 30-045-26364

GL: 6483'

History:

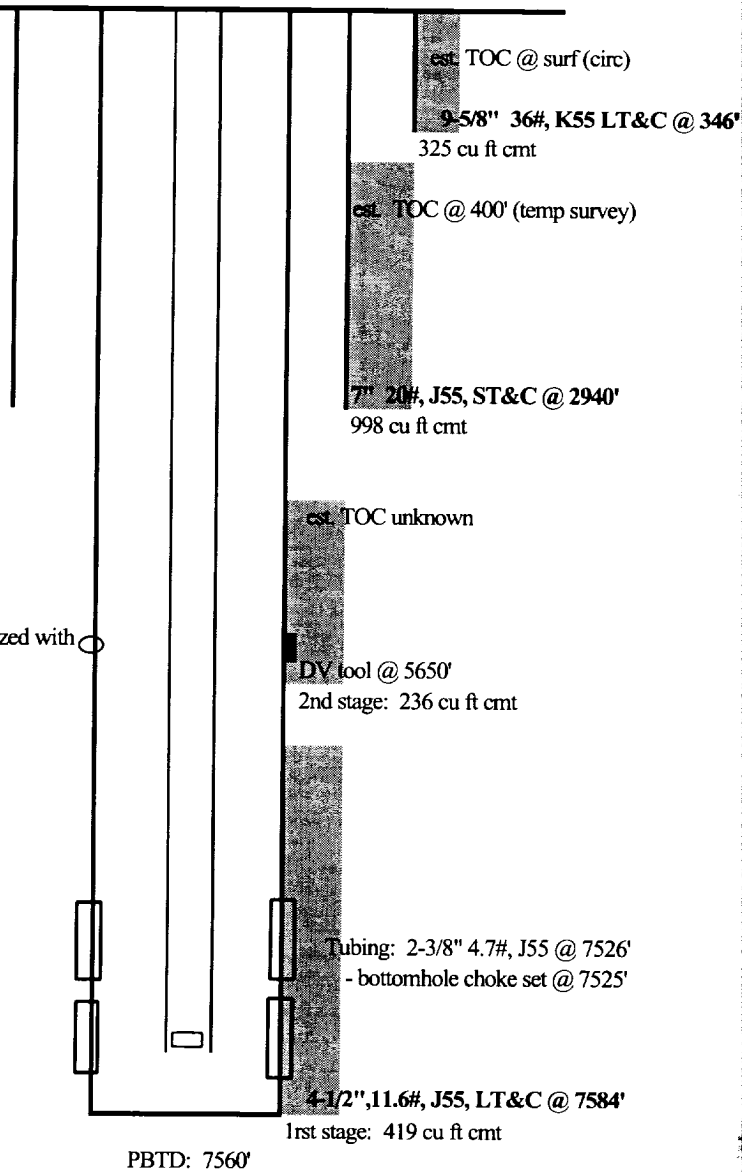
Completed in 7/85

- Drilled to lower Dak w/ air
 - Mud up at TD, minor losses
- Bottomhole choke set in 12/85

DV interval (5624 - 5626') squeezed with
59 cu ft cmt

Original Dakota Perforations

- 7376 - 7392' 4 spf
- 7462 - 7484' 4 spf
- 7506 - 7522' 4 spf
- 7540 - 7548' 4 spf



Notes:

- good circulation during both stages
- Plunger junk tagged @ 7508' (SI run 12/10/99)
- Fluid level @ 6720'

updated: 9/2/99 jad



District I

1625 N. French Dr., Hobbs, NM 88240

District II

811 South First, Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources DepartmentOIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505Form C-102
Revised August 15, 2000Submit to Appropriate District Office
Lease - 4 Copies
Lease - 3 Copies

ENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-045-26364	² Pool Code 72319	³ Pool Name Blanco Mesaverde
⁴ Property Code 001172	⁵ Property Name Trigg Federal Gas Com B	
⁷ OGRID No. 000778	⁸ Operator Name Amoco Production Company	
		Well Number 1
		Elevation 4483'

¹⁰ Surface Location

UL or lot no. Unit I	Section 15	Township 29N	Range 09W	Lot Idn	Feet from 2105'	North/South South	Feet from 875'	East/West East	County San Juan
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¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from	North/South	Feet	East/West	County
¹² Dedicated Acres 303.67	¹³ Joint or Infill		¹⁴ Consolidation Code			¹⁵ Order No.			

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A
NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

				⁷ OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief. Mary Signature Mary Printed Name Sr. Regulatory Analyst Title 11/01/2001 Date
				¹⁸ SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision and that the same is true and correct to the best of my knowledge. 12/6/2004 Date of Survey Signature and Seal of Professional Surveyor: Gary D. V... 7016 Certification Number

