Form 3169-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR

| | FOR | M APPR | OVE | D | | | |
|-----------------------------|--------|--------|-----|------|--|--|--|
| Sudget Bureau No. 1004-0135 | | | | | | | |
| E> | oires: | March | 31. | 1993 | | | |

| BUREAU | 5. Lease Designation and Serial No. SF-078497 6. If Indian, Allottee or Tribe Name | | | |
|--|--|---|--|--|
| SUNDRY NOT Do not use this form for propo Use "APPLICA | | | | |
| | | 7. If Unit or CA, Agreement Designation | | |
| 1. Type of Well Oil Gas Well Other 2. Name of Operator Amoco Production Company | Attention: | 8. Well Name and No. North East Blanco Unit #309 9. API Well No. | | |
| 3. Address and Telephone No. | Julie L. Acevelo | | | |
| P.O. Box 800, Denver, Colorado | 80201 (303) 830-6003 | Basin Dakota | | |
| 4. Location of Well (Footage, Sec., T., R., M., or S | | 3003925312 | | |
| _ | Sec. 8 T 30N R 7W | 11. County or Parish, State | | |
| 920FSL 860FEL | | Die Asilia | | |
| | | Rio Arriba New Mexico | | |
| | ATE BOX(s) TO INDICATE NATURE OF NOTICE, | | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | N | | |
| Notice of Intent Subsequent Report Final Abandonment Notice | Abandonment Recompletion Plugging Back Casing Repair Altering Casing Other Plug Back (Note: Re | Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water eport results of multiple completion on Well Completion or | | |
| Describe Proposed or Completed Operations (Ci subsurface locations and measured and true vo | learly state all pertinent details, and give pertinent dates, including estimated date of start ertical depths for all markers and zones pertinent to this work.)* | letion Report and Log form.) ting any proposed work . If well is directionally drilled, give | | |
| Amoco Production Company in your approval by September 1 | ntends to plug back the subject well to the Pictured Cliffs 1, 1994. | formation. Procedures will be sent for | | |
| | se contact Julie L. Acevedo <u>@ (303) 830-6003</u> | | | |
| PCAGO | DEARMEN | | | |

OIL COM. DIV. DIST. 3

| 14. I hereby certify that the faregoing is true and correct Signed | Title | Sr. Staff Assistant | Date | 06-30-1994 |
|---|-------|---------------------|---------------|------------|
| (This space for Federal or State office use) | | | | |
| Approved by Conditions of approval, if any: | Title | | Date | |
| | | * * # # | E 10,07 D D-1 | |

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

* See Instructions on Reverse Side