5. LEASE

UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

DEPARTMENT OF THE INTERIOR	SF-078767
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
	<u> </u>
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9–331–C for such proposals.)	Rosa Unit
reservoir, data form 3-303-3 for adent proposation	TO TAKE OF FEVOR MANE
1. oil gas 🖾 other	
2. NAME OF OPERATOR	9. WELL NO. 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	10. FIELD OR WILDCAT NAME
AMOCO PRODUCTION COMPANY 3. ADDRESS OF OPERATOR	
	Basin Dakota 11. SEC., T., R., M., OR BLK. AND SURVEY OR
501 Airport Drive Farmington, NM 87401 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	
below.) 1960' FSL x 815' FWL, Section 13,	T-31-N, R-6-W
AT SURFACE: T-31-N, R-6-W AT TOP PROD. INTERVAL: Same	12. COUNTY OR PARISH 13. STATE
	Rio Arriba NM
AT TOTAL DEPTH: Same	14. API NO. 1941 1 1993
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	30-039-21758
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	6346' GL 5 6359' KB 5 5 7
TEST WATER SHUT-OFF	7 - 50 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1
FRACTURE TREAT	그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그
SHOOT OR ACIDIZE	than than than than than than than than
REPAIR WELL	(NOTE: Report results of multiple completion or zone
PULL OR ALTER CASING	change on Form 9–330.): 유명 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등 등
CHANGE ZONES	
ABANDON* 📋 📋	Togo II Togo I
(other) Operator Change	
including estimated date of starting any proposed work. If well is demeasured and true vertical depths for all markers and zones pertined November 14, 1978 - Amoco Production Company Pipeline Corporation; the	turned subject well over to Northwe
raperine corporation, in	
The new operator's address is:	
1	
Northwest Pipeline Corporation	Szorion Szo
P.O. Box 90	TO THE REAL PROPERTY.
Farmington, NM 87401	
	10 1978 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
	The second of th
	········ / Tr とる配配配配配配配配配配配配
July 2 or	<u> </u>
Subsurface Safety Valve: Manu. and Type	3 Set @ Ft.
18. I hereby certify that the foregoing is true and correct	
SIGNED 🖳 🖺 🚉 🤾 🔾 💮	DVI. DATE
(This space for Federal or State of	fice use)
·	Topic Services of the services
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	DATE
	Constant of the control of the contr
A. هـ	es as tord of the tord of the same of the
<u>5</u> †.	175 % 1448

*See Instructions on Reverse Side