

Form 1000-3
December 1989

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-1115
Expires September 30, 1990

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	7. If Unit or C.A. Agreement Designation
2. Name of Operator Amoco Production Company Attn: John Hampton	8. Well Name and No. Gartner LS #7
3. Address and Telephone No. P.O. Box 800, Denver, Colorado 80201	9. API Well No. 30-045-09103
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1190 F1L X 1650 FWL 1830 F1L X 1460 FWL, SEC. 26-30N-8W	10. Field and Pool, or Exploratory Area Blanco Mesaverde
	11. County or Parish, State San Juan, New Mexico

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompleton
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other
	Acidize

13. 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.)

Amoco Production Company acidized the subject with 3000 gal 15% HCL & 550 gal super A-SOL from 5000'-4460'. The well was returned to production 4/27/90.

Please call Cindy Burton at 303-830-5119 if you have any questions.

RECEIVED
OCT 31 1990

OIL CON. DIV.

ACCEPTED FOR RECORD

14. I hereby certify that the foregoing is true and correct	DIST. 3	OCT 24 1990
Signed <u>J. Hampton/CUB</u>	Title <u>Sr. Staff Admin. Supv</u>	Date <u>9/26/90</u>
(This space for Federal or State office use)		
Approved by _____	Title _____	BY <u>RET</u>
Conditions of approval, if any: _____		

FARMINGTON RESOURCE AREA

NMC