

CONFIDENTIAL
REVISED 10-1-72

NAME OF OPERATOR	
DISTRIBUTION	
SANTA FE	
FILE	
RECORDS	
LAND OFFICE	
OPERATOR	

34. INCIDENT TYPE OF LOSS
State ☐ Fed ☒
3. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REEVALUATE OR PLUG WELLS TO A DIFFERENT DEPTH OR TO
USE TRANSPORTATION FOR PRODUCTION OF OIL OR GAS OR FOR SUCH PROPOSALS.

1. Name of Operator Amoco Production Company	7. Unit Agreement No.
2. Address of Operator 2325 East 30th Street; Farmington, NM 87401	8. Form of Lease Hold Likins Gas Com A
3. Location of Well UNIT LETTER <u>L</u> <u>1820</u> FEET FROM THE <u>South</u> LINE AND <u>1095</u> FEET FROM THE <u>West</u> LINE, SECTION <u>34</u> TOWNSHIP <u>30N</u> RANGE <u>9W</u>	9. Well No. 4
10. Field and Name of Well Undesignated Fruitland Blanco Pictured Cliffs	11. County San Juan
12. Elevation (Show whether DF, RT, CR, etc.) 5725' GL	

13. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
FULL OR ALTER CASING ☐PLUG AND ABANDON ☐
CHANGE PLANS ☐REMEDIAL WORK ☐
COMMENCE DRILLING OPER. ☐
CASING TEST AND CEMENT JOB ☐
OTHER Recompletion ☒ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

14. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent data, including estimated cost of starting any proposed work; SEE RULE 1102.)

Moved in and rigged up service unit on 4-27-87. Set a drillable bridgeplug at 2390' and pressure tested to 3400#. Dropped 1.5 cf cement on top of bridgeplug. Perforated the following intervals: 2332' - 2365', 4 jsfp, .43" in diameter, for a total of 132 holes. Ran pressure falloff test. Fraced interval 2332' - 2365' with 111,000 gals. 30# cross-linked gel and 190,000# 12-20 mesh sand and 12,000# resin control tail sand. Drilled and circulated sand fills. Landed 2-3/8" tubing at 2382'. Ran pump and rods and released the rig on 5-10-87. Turned the well over to production department for testing.

RECEIVED
MAY 20 1987
OIL DIV.
DPT. 3

15. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED BS Shaw TITLE Adm. Supervisor DATE 5-15-87

Original Signed by CHARLES GHOLSON

APPROVED BY _____ DATE MAY 20 1987**CONFIDENTIAL**