

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. SF-077231-A
2. NAME OF OPERATOR Amoco Production Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 2325 E. 30th Farmington, NM 87401		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1060' FNL x 1850' FEL		8. FARM OR LEASE NAME John F. Shaw
14. PERMIT NO.		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6018' GL		10. FIELD AND POOL, OR WILDCAT Blanco Pictured Cliffs
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NW/NE Sec 14, T30N, R9W
		12. COUNTY OR PARISH San Juan
		13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/> Recompletion	

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. 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.)\*

Moved in and rigged up service unit on 12-30-87. Set a castiron bridgeplug at 2770' and pressure tested to 3500 psi. Perforated the following intervals: 2652' - 2670', 2689' - 2699', 2730' - 2738', 4 jspf, .50" in diameter, for a total of 144 holes. Fraced interval 2652' - 2738' with 89,550 gals 30# crosslinked gel and 85,200# 12-20 mesh brady sand. Set a retrievable bridgeplug at 2625' and pressure tested to 3500 psi. Perforated the following intervals: 2514' - 2548', -4 jspf, .50" in diameter, for a total of 136 holes. Fraced interval 2514' - 2548' with 112,000 gals 30# crosslinked gel and 200,000# 12-20 mesh brady sand. Circulated hole clean and released bridgeplug set at 2625'. Landed 2-3/8" tubing at 2730' and released the rig on 1-22-88.

RECEIVED  
FEB 23 1988  
OIL CON. DIV./  
DIST. 3

18. I hereby certify that the foregoing is true and correct

SIGNED John F. Shaw TITLE Adm. Supervisor DATE 1-28-88

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

FEB 04 1988

FARMINGTON RESOURCE AREA

\*See Instructions on Reverse Side

NMOCO