UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

RECEIVED
OCT 2 6 1998
OIL CON. DIV.
DIST. 3

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.
NM-0607

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
AMOCO PRODUCTION COMPANY

Attention: Gail M. Jefferson

3. Address and Telephone No.
P.O. BOX 800 DENVER, COLORADO 80201   (303) 830-6157

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1190' FSL   1500' FEL   Sec. 3 T 30N R 10W   UNIT O

8. Well Name and No.
Koch LS   #1A

9. API Well No.
3004523377

10. Field and Pool, or Exploratory Area
Blanco Mesaverde

11. County or Parish, State
SAN JUAN   NEW MEXICO

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

TYPE OF SUBMISSION	TYPE OF ACTION	
☐ Notice of Intent	☐ Abandonment	☐ Change of Plans
☒ Subsequent Report	☐ Recompletion	☐ New Construction
	☐ Plugging Back	☐ Non-Routine Fracturing
	☐ Casing Repair	☐ Water Shut-Off
☐ Final Abandonment Notice	☐ Altering Casing	☐ Conversion to Injection
	☒ Other New Tubing Depth	☐ Dispose Water

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

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.)*

MIRUSU 10/8/98, NDWH, NUBOP, tbg first landed at 5732'. PU 2 jts and tag fill at 5780'. LD 10 jts from original string and releand at 5430'.

NDBOP, NUWH, release rig 10/8/98.

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

Signed _Gail M. Jefferson_   Title Sr. Admin. Staff Asst.   Date 10-16-1998

(This space for Federal or State office use)

Approved by _____ Title _____
Conditions of approval, if any:

ACCEPTED FOR RECORD
OCT 2 3 1998
FARMINGTON DISTRICT OFFICE

* See Instructions on Reverse Side

AMOCO