

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

P.O. Box 2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.	3004525559
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	

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" (FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name	BURINGTON GAS COM C
8. Well No.	# 1E

1. Type of Well:
 OIL WELL GAS WELL OTHER

2. Name of Operator
 AMOCO PRODUCTION COMPANY Attention Nancy I. Whitaker

9. Pool name or Wildcat
 BASIN DAKOTA

P.O. Box 800 Denver Colorado 80201 303-830-5039

4. Well Location
 Unit Letter D : 825 Feet From The NORTH Line and 1050 Feet From The WEST Line
 Section 21 Township 30N Range 11W NMPM SAN JUAN County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: DEMAND LETTER DTD 6/6/97 <input checked="" type="checkbox"/>		OTHER: <input type="checkbox"/>	

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.
 AMOCO PRODUCTION COMPANY REQUESTS TO LEAVE THIS WELL SHUT FOR AN ADDITIONAL 90 DAYS TO EVALUATE OTHER FORMATION POTENTIAL.

RECEIVED
 JUL 14 1997
 OIL CONSERVATION DIVISION
 DISTRICT I

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

SIGNATURE Nancy I. Whitaker TITLE Staff Assistant DATE 07-07-1997
 TYPE OR PRINT NAME Nancy I. Whitaker TELEPHONE NO. 303-830-5039

(This space for State)

APPROVED BY Johnny Robinson TITLE DEPUTY OIL & GAS CONSERVATION DIVISION DATE JUL 14 1997
 CONDITIONS OF APPROVAL, IF ANY: