

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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <u>coal seam</u>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Amoco Production Company ATTN: J.L. HAMPTON	8. FARM OR LEASE NAME Florange O
3. ADDRESS OF OPERATOR P. O. Box 800 Denver, Colorado 80201	9. WELL NO. 3
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1845' FNL, 1560' FEL SW/NE	10. FIELD AND POOL, OR WILDCAT Basin Fruitland Coal Gas
14. PERMIT NO. <u>API</u> 30-045-27383	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 24, T30N, R9W
15. ELEVATIONS (Show whether OF, RT, GR, etc.) 5797' GR.	12. COUNTY OR PARISH San Juan
	13. STATE N.M.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>spud &amp; set casing</u>	

(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.)\*

Spud a 12 1/4" surface hole on 6/25/89 at 1600 hrs. Drilled to 273'.  
Set 9 5/8" 36# K-55 surface casing at 272'. Cemented with 200 SX C1B. Circulated 100 BBLs to the surface.  
Pressure tested casing to 1500 psi. Drilled a 8 1/4" hole to a TD of 2263' on 6/28/89. Set 7" 23# K55 production casing at 2263'. Cemented with 400 SX 65/35 por, tail with 100 SX C1B near surface. Circulated 30 BBLs good cement to the surface.  
Rig Released at 0645 hrs. on 6/28/89.

RECEIVED  
FEB 07 1990  
OIL CON. DIV  
DIST. 3

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

SIGNED J. Hampton / CUB TITLE Sr. Staff Admin. Supv. DATE 12/18/89

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

Smm