

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBJECT OF CERTIFICATION
(Include instructions on re-
verse side)

Budget Bureau C. 1004-0135
Expires August 31, 1985
6. LEASE DESIGNATION AND SERIAL NO.

SF-081098-A

8. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR
Amoco Production Company

3. ADDRESS OF OPERATOR
P.O. Box 800, Rm. 1846, Denver, CO 80201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

14. PERMIT NO. 1220' FEL, 2465' FNL

15. ELEVATIONS (Show whether OF, AT, OR, etc.)
6106' KB

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐	WATER SHUT-OFF	☐
FRACTURE TREAT	☐	RETAINING WELL	☐
SHOOT OR ACIDIZE	☐	ALTERING CASING	☐
REPAIR WELL	☐	ABANDONMENT*	☒
(Other)	☐	(Other) Amendment to APD	☐

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.)

Please be advised of the following changes for the above referenced well.
Also please note the corrected elevation above.

Formation Tops:	Marker	Depth	Elevation
	Fruitland	2601'	+3534'
	Ignacio Seam	2711'	+3395'
	Cottonwood Seam	2802'	+3333'
	Cahn Seam	2838'	+3297'
	Pictured Cliffs	2911'	+3195'

Total Depth: 3140'

7" Intermediate Casing Point: 2681'

ACCEPTED FOR RECORD

AUG 15 1989

FARMINGTON RESOURCE AREA

BY [Signature]

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

SIGNED [Signature]
(This space for Federal or State office use)

TITLE Admin. Supv.

DATE 6/6/89

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side