

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
BLM

FORM APPROVED
Budget Bureau No. 1004-1133
Expires September 30, 1990

91 JAN 16

019 FAR

SF-078336B

1. Land Designation and Serial No.

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

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

Coal Seam

2. Name of Operator

AMOCO PRODUCTION COMPANY

3. Address and Telephone No.

P.O. BOX 800, DENVER, COLORADO 80201. ATTN: JOHN HAMPTON RM 1846

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1070' FNL, 1490' FEL, NW/NE Sec. 20, T31N-R9W

7. If Unit or C.A. Agreement Designation

8. Well Name and No.

Barrett "A" 16

9. API Well No.

30 045 27924

10. Field and Pool, or Exploratory Area

Basin Fruitland Coal Gas

11. County or Parish, State

San Juan, New Mexico

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

TYPE OF SUBMISSION

☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Squeeze
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection

(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.)

Perf: 12/6/90

1974'-1975', W/2 JSPF, .46" diam., 2 shots open.

Squeeze: 1974'-1975'

Pumped 480sx Cl B Pacesetter lite 65/35, tail with 60 sx Cl B neat.
Disp. with 9 BFW. Circulate 18 BBl cement to pit.

RECEIVED
FEB 19 1991
OIL CON. DIV.
DIST. 3

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

Signed

J. L. Hampton

Title Sr. Staff Admin. Supr.

Date 1/14/91

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

NMOCD

Date

Signature of Approver

Smm