Form 3160-5 (December 1989)

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

SUNDRY NOTICES AND REPORTS ON WELLS

FORM APPROVED Budget Bureau No. 1004-0135 Expires: September 30, 1990

5. Lease Designation and Serial No.

NMSF-078039

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De makerna He's for a formation of the College		1414101 -070000
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 6. If India		6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE 7. If Unit		7. If Unit or CA, Agreement Designation
I. Type of Well OIL WELL GAS WELL OTH OTH 2. Name of Operator Amoco Production Company 3. Address and Telephone No. P.O. Box 3092 Houston, TX 7725 4. Location of Well (Footage, Sec., T., R., M., or Survey)	Melissa Velasco MAR 2000 Mar 2000	8. Well Name and No. Barnes #17 API Well No. 30-045-25308 M. Field and Pool, or Exploratory Area Basin (Dakota) DK 11. County or Parish, State
885' FWL 1530' FSL Sec 22		San Juan New Mexico
12. CHECK APPROPRIATE BOX(s	s) TO INDICATE NATURE OF NOTICE, REPO	ORT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	NC
➤ Notice of Intent ☐ Subsequent Report ☐ Final Abandonment Notice	Abandonment Recompletion Plugging Back Casing Repair Altering Casing Other BLM Letter 1/18/2000	Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection
Amoco Production Company is in the Plugging procedures are being formulanticipate this filing to be completed	Recompletion Report and Log for arry state all pertinent details, and give pertinent dates, including the locations and measured and true vertical depths for all marks are process of obtaining partner approval to plugulated and will be forwarded to your office for a and filed with your office within 30 days. Final 100% partner approval is obtained as mandate	and abandon the subject well. pproval upon completion. We
14. I hereby certify that the foregoing is true and corre Signed Mellos Los Corre (This space for Federal or State office use)	Title Permitting Staff Assistant	Date 02/29/00
Approved by	Title	Date
		E STATE OF THE PERSON