5. LEASE

UNITED STATES

DEPARTMENT OF THE INTERIOR	M00-C1420-1731
GEOLOGICAL SURVEY	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
V	Ute Mountain Tribe
SUNDRY NOTICES AND REPORTS ON WELLS	7. UNIT AGREEMENT NAME
oo not use this form for proposals to drill or to deepen or plug back to a different servoir. Use Form 9–331–C for such proposals.)	8. FARM OR LEASE NAME
	Mountain Ute Tribal "C"
well well other	9. WELL NO.
2. NAME OF OPERATOR	10. FIELD OR WILDCAT NAME
Amoco Production Company	Wildcat
3. ADDRESS OF OPERATOR 501 Airport Drive Farmington, NM 87401	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA
balow)	SE/4 NE/4 Section 23, T32N, R15W
AT SURFACE: 1070' FSL x 820' FEL Section 23.	12. COUNTY OR PARISH 13. STATE
AT TOP PROD. INTERVAL: Same T32N, R15W	San Juan New Mexico
AT TOTAL DEPTH: Same	14. API NO.
6. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,	30-045-23541
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
PEQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	6683' GL
(LQULUT TOIL TIETHER)	
rest water shut-off	
SHOOT OR ACIDIZE	
REPAIR WELL	(NOTE: Report results of multiple completion or zone change on Form 9-330.)
PULL OR ALTER CASING	Change on Form 3-550, g
MULTIPLE COMPLETE	
CHANGE ZONES U U ABANDON*	
(other) Change of Plans	
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly stational including estimated date of starting any proposed work. If well is measured and true vertical depths for all markers and zones pertinent.)	te all pertinent details, and give pertinent dates, directionally drilled, give subsurface locations and ent to this work.)*
Please be advised that Amoco Production Comp	any will not drill the subject
11 og planned. In a telephone conversatio	n on 11/2//9 between Mr. Gary
Munson Munson of Amoco Production and Mr. Ca	rl Barrick of the USGS, Mr. Munso
advised Mr. Barrick of this change.	
advised iii. Barrien or the	
	EIVE
the management of the second o	10V 1.0 1979) 1 2 0 9 1979
Subsurface Safety Valve: Manu. and Type	Dish. 3
18. I hereby certify that the foregoing is true and correct	
SIGNED TITLE Dist. Adm.	Supi: DATE11/7/79
(This space for Federal or State office use)	