

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☐ gas ☒ other

2. NAME OF OPERATOR

Amoco Production Company

3. ADDRESS OF OPERATOR

501 Airport Drive Farmington, NM 87401

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 700' FSL x 790' FWL, Section 12,

AT TOP PROD. INTERVAL: Same T32N, R14W

AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐CHANGE ZONES ☐ABANDON* ☐

(other) Change of Plans

5. LEASE

MOO-C-1420-1729

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Ute Mountain Tribe

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Ute Mountain Tribal "0"

9. WELL NO.

2

10. FIELD OR WILDCAT NAME

Ute Dome Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

SW/4 SW/4 Section 12, T32N, R14W

12. COUNTY OR PARISH 13. STATE

San Juan

New Mexico

14. API NO.

30-045-23683

15. ELEVATIONS (SHOW DF, KDB, AND WD)

6900' GL

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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 that Amoco Production Company will not drill the subject well as planned. In a telephone conversation on 11/2/79 between Mr. Gary Munson of Amoco Production and Mr. Carl Barrick of the USGS, Mr. Munson advised Mr. Barrick of this change.

Subsurface Safety Valve: Manu. and Type

Set @

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

Original Signed

SIGNED E. E. SVOBODA

TITLE Dist. Adm. Supr. DATE

11/7/79

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: