5. LEASE

UNITED STATES DEPARTMENT OF THE INTERIOR

| DEPARTMENT OF THE INTERIOR | I-149-IND-8478 | |
|--|--|--|
| GEOLOGICAL SURVEY | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME | |
| decedione soliter | Navajo Tribe | |
| SUNDRY NOTICES AND REPORTS ON WELLS | 7. UNIT AGREEMENT NAME | |
| SUNDRY NUTICES AND REPORTS ON WELLS | Gallegos Canyon Unit | |
| (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.) | 8. FARM OR LEASE NAME | |
| 1. oil gas vy | | |
| well well other | 9. WELL NO. | |
| 2. NAME OF OPERATOR | 177E | |
| Amoco Production Company | 10. FIELD OR WILDCAT NAME | |
| 3. ADDRESS OF OPERATOR | Basin Dakota | |
| 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 SE/NE, Section 31, T28N, R12 | |
| below.) | 12. COUNTY OR PARISH 13. STATE | |
| AT SURFACE: 1750' FNL x 990' FEL AT TOP PROD. INTERVAL: Same | | |
| AT TOTAL DEPTH: Same | San Juan New Mexico | |
| 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, | 30-045-25174 | |
| REPORT, OR OTHER DATA | 15. MEVATIONS (SHOW DF, KDB, AND WD) | |
| | 5667' GL | |
| REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF STREET SHOT OR ACIDIZE SHOOT OR ACIDIZE SHOOT OR ACIDIZE SHOOT OR ALTER CASING SHOULT OF SHOOT OR ALTER CASING SHOULT SHOOT OR ALTER CASING SHOOT OR ALTER CASING SHOOT OR ALTER CASING SHOOT OF SHARWING SHARWING SHOOT OF SHARWING SH | SINGLE: Report results of multiple completion or zone change on Form 9–330.) | |
| 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly statincluding estimated date of starting any proposed work. If well is measured and true vertical depths for all markers and zones pertine | ent to this work.)* | |
| Amoco Production Company requests an extensi | on on the above-named well as the | |
| approval expires 2-28-83. Amoco would like | to drill this well by March 31, | |
| 1983 but is having a problem obtaining NIIP | right-of-way approval. | |
| extended to | 8-28-83 | |
| | | |
| | | |

| Subsurface Safety Valve: Manu. and Type | | | Ft |
|---|---|-----------|----|
| 18. I hereby certify that the foregoing is true Original Signed By SIGNED B.T. Roberson | and correct | 1-28-83 | |
| (1 | This space for Federal or State office use) | APPROVED | = |
| APPROVED BY | TITLEDATE | S AMENDED | |

*See Instructions on Reverse Side

DISTRICT ENGINEER

10 1 10 10 W