

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No 1004-0135
Expires: March 31, 1993

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 <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No LC-029392 (b)
2. Name of Operator Amoco Production Company (713) 366-7686	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P. O. Box 3092, Houston, TX 77253-3092 Room 18.108	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 660' FNL x 1980' FWL, (Unit Letter C) Sec. 36, T-18-S, R-31-E	8. Well Name and No. Greenwood Federal F-1 Com Well No. 1 Cherry Canyon
	9. API Well No. 30-025-23388
	10. Field and Pool, or Exploratory Area Shugart, North-Atoka-Gas
	11. County or Parish, State Eddy, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input checked="" type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other	<input type="checkbox"/> Dispose Water

(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.)*

PER FORM 3160-5 SUBMITTED 2/2/94. WE ARE ABANDONING THE SHUGART NORTH ATOKA FORMATION.

NOTE: RECOMPLETION TO THE DELAWARE TAKES THIS WELL OUT OF COM BOUNDARIES. ON FUTURE FILINGS, WELL WILL BE KNOWN AS THE GREENWOOD FEDERAL /CHERRY CANYON/ WELL NO. 1.

RECEIVED
APR 11 10 39 AM '94
CATHART AREA

14. I hereby certify that the foregoing is true and correct.
Signed Devina M. Princi Title Staff Assistant Date 4-7-94
(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any:

Pool Name in sec. 10 above is incorrect.

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See instruction on Reverse Side