

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

UNOCO INC.

3. ADDRESS OF OPERATOR

2800 BOK 100, 113220, FARMINGTON, NM

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

1500' FNL & 1650' FNL

AT SURFACE:

AT TOP PROD. INTERVAL:

AT TOTAL DEPTH:

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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) RAN CASING

SUBSEQUENT REPORT OF:

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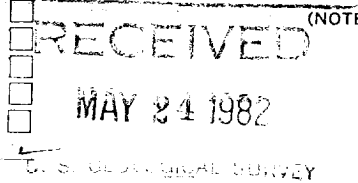
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5. LEASE

CONTRACT 124

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

JICARILLA APACHE

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

AXI APACHE M

9. WELL NO.

6

10. FIELD OR WILDCAT NAME

BLANCO PICTURED CLIFFS & MESAVIRDE

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

SEC. 14, T-25N, R-4W

12. COUNTY OR PARISH

RIO ARriba

13. STATE

NM

14. API NO.

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

7370' GR

(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.)*

RUN 148 jts 7" cas. Set @ 6350'. Cont 1st stage w/1450' cas

CLASS 'B' plus 2 1/2 gal 2 1/2 CACL plus 1/4 #/sq cello flake

THINLED w/1450' cas CLASS 'B' plus 2 1/2 CACL plus 1/4 #/sq cello flake.

Cont 2nd stage w/1450' cas CLASS 'B' cont, plus 2 1/2 gal, 2 1/2 CACL, plus 1/4 #/sq cello flake.

THINLED w/1450' cas CLASS 'B' plus 2 1/2 CACL plus 1/4 #/sq cello flake.

THINLED w/1450' cas CLASS 'B' plus 2 1/2 CACL plus 1/4 #/sq cello flake. No cont cas on both stages.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED W. A. Butterfield TITLE _____ DATE 5/21/82

(This space for Federal or State Office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

ACCEPTED FOR RECORD

MAY 25 1982

FARMINGTON DISTRICT

BY SM