

UNITED STATES  
DEPARTMENT OF THE INTERIOR (Other instructions on re-  
verse side)  
BUREAU OF LAND MANAGEMENT

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 "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	5. LEASE DESIGNATION AND SERIAL NO. SF-079366
2. NAME OF OPERATOR Union Oil Company of California (dba Unocal)	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 850, Bloomfield, New Mexico 87413	7. UNIT AGREEMENT NAME Rincon Unit
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1090' FSL, 1450' FEL	8. FARM OR LEASE NAME
14. PERMIT NO.	9. WELL NO. #112
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6623' DF	10. FIELD AND POOL, OR WILDCAT So. Bl. Pictured Cliffs
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 20, T27N, R6W
	12. COUNTY OR PARISH Rio Arriba
	13. STATE New Mexico

10. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)\*

Ran in hole with 5 1/2" packer on 2 3/8" tubing and set at 3101'. Pressure tested annulus - would not pressure up. Acidized Pictured Cliffs perms from 3214' to 3170' with 1000 gals. 15% HCl with surfactant, displacing with 14 bbls. 1% KCl water. Swabbed dry with no blow. POOH with 2 3/8" tubing and packer.  
Production Before: 0 MCF/D Production After: 0 MCF/D

18. I hereby certify that the foregoing is true and correct  
SIGNED Bill Hering TITLE Area Petroleum Engineer DATE June 5, 1989  
(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_  
NMCCD

\*See Instructions on Reverse Side

ACCEPTED FOR RECORD

JUN 19 1989

EARMINGTON RESOURCE AREA

BY KL

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.

WH/s1