

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions on re-  
verse side)

Form approved  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

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 <input type="checkbox"/>	2. NAME OF OPERATOR Union Oil Company of California	3. ADDRESS OF OPERATOR P. O. Box 671 - Midland, TX 79702	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1080' FNL & 1240' FEL	5. LEASE DESIGNATION AND SERIAL NO. SF-079298-D	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	7. UNIT AGREEMENT NAME Rincon Unit	8. FARM OR LEASE NAME Rincon Unit	9. WELL NO. 276	10. FIELD AND POOL, OR WILDCAT Basin Fruitland Coal	11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec. 13, T27N, R7W	12. COUNTY OR PARISH Rio Arriba	13. STATE NM
14. PERMIT NO.				15. ELEVATIONS (Show whether DP, RT, GR, etc.) 6636' GR								

16. 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 type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>	(Other) Completion work	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
(Other)				(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 some pertinent to this work.)

4/25 APOLLO RAM GR CCL CORR LOG FRM WLTD 3254-2200'. PERF'D FRUITLAND COAL SEAM THR 4-1/2" CSG W/3-1/8" CSG GUN W/4 SPF @ 3100-3204' (192 HOLES). F-LVL 2100' & STDY. SWI @ 7:30 PM 4-25-90. (PREP TO FRAC).

4/28 RAM BHP. SAND FRACD FRUITLAND COAL PERFS 3100-3204'. DOWN 4-1/2" CSG 2/ 74,000 GAL MINI MAX II 30# BORATE GEL SYSTEM W/ 262,000 LBS 20/40 SAND & 9,000 LBS 100 MESH SAND @ 40-34 BPM @ 970-1120-1060-1400-1200 PSI ISIP 850 (5) 700 (10) 550 (15) 860 (30) 860 PSI. TLTR 1755 BBLs. SDON.

4/29 SICP ON/25 HRS. OPEN TO PIT. NO FLUID RECD SWI. PREP TO CLEAN OUT SD.

5/4 MI RU PETRO WS DD PU. 11 DAY SICP VAC. NO TREE & NU BOP. RAM NOTCHED COLLAR & SN, PU 2-3/8" TBG TO TOP SD @ 2874'. WASH SD TO 3259' ETD. LOST 100 BFW. PUH TO 2969'. SDON.

5/5 SITP & CP VAC/10. RIH TO 3259' ETD, NO FILL. REV CIRC CLEAN (90 BFW TO LOAD HOLE). PUH & LAND 99 JTS (3117') 2-3/8" 4.7# J-55 EUE BRD T&C NEW SMLS TBG @ 3127' W/SN @ 3126'. NO BOP. NU TBG HD & TREE. SWBD 188 BW/9 HRS. F-LVL 400-2300' & STDY. SWBD 27 BTF LAST HR, GOOD GAS SHOW. HOOK UP 20/64" CK W/10 HRS. 2 HRS INTERMITTER. TR 188 OF 1945 BLW. SDON.

5/18 CLEANING UP WELL. TBG PRES 90, CSG PRES 250.

5/19 FLWD 101 MCFD + 5 BW, FTP 125#, CP 280#. TR 177 OF 1945 BLW.

5-26: FLWD 109 MCF GAS + 5 BW/24 HR THRU SEPARATOR W/110# FTP & 210#CP. TR 199 OF 1945 BLW.

5-27: FLWD 109 MCF GAS + 4 BW/24 HR THRU SEPARATOR W/110# FTP & 210#CP. TR 203 OF 1945 BLW.

5-28: FLWD 112 MCF GAS + 5 BW/24 HR THRU SEPARATOR W/120# FTP & 195#CP. TR 208 OF 1945 BLW.

5-29: FLWD 121 MCF GAS + 8 BW/24 HR THRU SEPARATOR W/100# FTP & 170#CP. TR 216 OF 1945 BLW.

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

SIGNED Charlotte Beeson TITLE Drilling Clerk DATE 4-30-90

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

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

ACCEPTED FOR RECORD

JUN 25 1990

FARMINGTON RESOURCE AREA

\*See Instructions on Reverse Side  
NMOCD

BY WLL

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions on reverse side)

SF-079298

IF INDIAN ALLOTTEE OR TRIBE NAME

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. WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME <b>Rincon Unit</b>
2. NAME OF OPERATOR <b>Union Oil Company of California</b>	8. FARM OR LEASE NAME <b>Rincon Unit</b>
3. ADDRESS OF OPERATOR <b>P. O. Box 671 - Midland, Texas 79702</b>	9. WELL NO. <b>277</b>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below) <b>1034' FSL &amp; 1677' FWL</b>	10. FIELD AND POOL OR WILDCAT <b>Basin Fruitland Coal</b>
11. PERMIT NO.	11. SEC., T., R., M., OR S.E. AND SURVEY OR AREA <b>Sec. 13, T.27N, R.7W</b>
12. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>6721' GR</b>	12. COUNTY OR PARISH, 13. STATE <b>Rio Arriba NM</b>

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"/>
FRAC TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRAC TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <b>Spud-Run Surf. &amp; prod. csg.</b> <input checked="" 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.)

5/31 362' WOC. 362' 7-3/4. SD & SH. 3/4" @ 362'. MI RU ARAPAHOE DRLG RIG NO. 6. SPUNDED 12-1/4" HOLE @ 6:00 PM MST 5-31-90 & TD'D SAME @ 1:45 AM MST 6-1-90 @ 362'. POH. R&C 7 JTS + 1 PC (363.85') 8-5/8" OD 20# X-42 BRD ST&C NEW SMLS CSG @ 362', CMT'D W/300 SXS CLASS "B" + 2% CACL2 + 1/4#/SX CELLO SEAL MIXED @ 15.6 PPG. DISP PLUG TO 290' W/17.4 BFW @ 3.5 BPM @ 0-250 PSI. PLUG DN CIP @ 4:17 AM MST 6-1-90. CIRC 90 SXS CMT TO SURF. WOC.

6/1 1251' DRLG. 889' 10-1/4. SD & SH. 1" @ 757'. MUD: 9.0, 34, 5.5, 1/32, 10, 350. WOC 4 HRS. NU BOP. WOC 3 HRS. PRES TST CK MANIFOLD, KILL LINE & BLIND RAMS TO 800 PSI/30 MINS, PRES HELD. RIH. PRES TST PIPE RAMS TO 800 PSI/30 MINS. PRES HELD. WOC 12 HRS. TAG T/C @ 270' & DRLD SAME TO 362'. DRLG.

6/4 3300' TD, WOC. MUD: 9.1, 44, 6.0. FINISH SHOR TRIP. HOLE TGT ON STDS 7 THUR 15. RIH. NO FILL, POOH. SLM 170 CORR. RAN SCHLUMBERGER OH LOGS AS FOLLOWS: FDC/HRL 3291-361', MLT 3291-2261' & COAL LOG 3291-3000'. RIH 10' FILL. LDDP & DC'S. R&C 77 JTS + 1 PC (3292') 4-1/2" OD 11.6# J-55 BRD LT&C NEW SMLS CSG & LANDED @ 3298', CMT'D W/TWO STAGES STA #1 W/150 SXS CLASS "H" + .9% FLOKOK-1 + 3% KCL + .18% THRIFTY LITE + 3#/SX HI-SEAL MIXED @ 15.9 PPG. DISP PLUG TO FC @ 3252' @ 6-3 BPM @ 100-400 PSI. BMD PLUG @ 900 PSI. REL PRES, HELD OK. DROPPED BOMB & OPEN DV TOOL @ 2862' @ 600 PSI @ 9:23 PM MST 6-4-90. CIRC 4 HRS. CIRC 63 SXS CMT TO SURF. CMT STA #2 W/700 SXS 65/35/6% GEL + .8% CF + 1/4#/SX CELLOSEAL + 3#/SX HI-SEAL MIXED @ 12.6 PPG F/B 50 SXS "B" NEAT MIXED @ 15.6 PPG. DISP PLUG TO DV TOOL @ 2862' @ 6-3 BPM @ 400-900 PSI. BUMP PLUG CLOSED DV TOOL W/2500 PSI. REL PRES, HELD OK. CIRC 242 SXS CMT TO SURF. CIP & JC @ 2:10 AM MST 6-5-90. ND BOP. SET SLIPS & CUT OFF 4-1/2" CSG. REL RIG @ 5:00 AM MST 6-5-90.

RECEIVED

JUN 29 1990

CON. DIV

DIST. 3

DATE 6-1-90

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

SIGNED Charlotte Beeson

TITLE Drilling Clerk

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE  
JUN 27 1990

FARMINGTON RESOURCE AREA

\*See Instructions on Reverse Side

BY

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate  
(Other instructions on re-  
verse side)

Budget Bureau No. 1004-0135  
Expires August 31, 1985

8. LEASE DESIGNATION AND SERIAL NO.

SF - 079298-D

9. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Rincon Unit

8. FARM OR LEASE NAME

Rincon Unit

9. WELL NO.

#276

10. FIELD AND POOL, OR WILDCAT

Basin Fruitland Coal

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

Sec 13, T27N, R7W

12. COUNTY OR PARISH 13. STATE

Rio Arriba

NM

SUNDRY NOTICES AND REPORTS ON WELLS

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Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Union Oil Company of California

3. ADDRESS OF OPERATOR

3300 N. Butler Suite 200 Farmington, NM 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

1080' ENL & 1240' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, ST, GR, etc.)

6636' GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON\* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT\* ☐

Request additional 30 day test period ☒

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

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The well was perforated 4/25/90. However, testing the well could not begin until 5/20/90 due to the time necessary following perforating to fracture treat, flow back frac load, run and land downhole production tubing, and set surface production equipment. An additional 30 day test period is requested so the well can be adequately tested and prepared for first delivery. Current flared volume is approximately 115 MCFPD.

RECEIVED  
JUN 15 1990

THIS APPROVAL EXPIRES 7/24/90

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

SIGNED

*[Signature]*

TITLE Field Superintendent

DATE 5/25/90

(This space for Federal or State office use)

APPROVED

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE JUN 15 1990

FOR Ken Townsend  
AREA MANAGER

\*See Instructions on Reverse Side