

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

95 OCT -4 PM 12:58

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

UNION OIL COMPANY OF CALIFORNIA

3. Address and Telephone No.

913 W. BROADWAY, P.O. BOX 850, BLOOMFIELD, NM 87413 (505)632-1811 EXT 14

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1900' FNL & 1365' FWL, S30, T27N, R06W

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

5. Lease Designation and Serial No.

SF 079364

6. If Indian, Allottee or Tribe Name

7. If Unit or CA Agreement Designation

RINCON UNIT

8. Well Name and No.

149M

9. API Well No.

30-039-25432

10. Field and Pool, or Exploratory Area

BASIN DAKOTA

11. County or Parish, State

RIO ARriba, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input 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 checked="" 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.)*

THE RINCON UNIT 149M WAS SPUD 07/09/95 AND COMPLETED 09/15/95 AS A DUAL STRING BASIN DAKOTA AND BLANCO MESA VERDE. SWAB TESTS ON THE DAKOTA INTERVAL HAVE INDICATED EXCESSIVE WATER PRODUCTION. IT IS NOT KNOWN AT THIS TIME IF EXCESSIVE FRACTURE HEIGHT GROWTH OR PERFORATION SELECTION IS RESPONSIBLE FOR THE WATER PRODUCTION. THIS WELL WILL NOT FLOW AND UNOCAL IS HEREBY REQUESTING THAT THE DAKOTA ZONE BE ALLOWED TO REMAIN SHUT-IN FOR A PERIOD OF EIGHT MONTHS UNTIL A REMEDIAL CEMENT OR ABANDONMENT PLAN IS FORMULATED.

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

Signed [Signature] Title PRODUCTION ENGINEER Date SEPT. 29th, 1995

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any:

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.

APPROVED

NMOC

OCT 09 1995

DISTRICT MANAGER