Form 3160-5 (June 1990)

or representations as to any matter within its jurisdiction.

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No.

SF 080385

SUNDRY NOTICES AND REPORTS ON WELLS 6. If Indian, Allottee or Tribe Name 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 7. If Unit or CA, Agreement Designation SUBMIT IN TRIPLICATE RINCON UNIT i. Type of Well 8. Well Name and No. Oil Well Gas Weil Other RINCON UNIT #185-E 2. Name of Operator 9. API Well No. UNION OIL COMPANY OF CALIFORNIA 30-039-25439 3. Address and Telephone No. 10. Field and Pool, or Exploratory Area P.O. Box 2620, Casper, WY 82602 (307) 234-1563 Ext. 116 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Basin Dak/Blanco M.V. 11. County or Parish, State 550' FSL & 1505' FEL Rio Arriba, NM Sec. 22, T27N-R7W CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA 12. TYPE OF ACTION TYPE OF SUBMISSION Change of Plans Abandonment Notice of Intent New Construction Recompletion Non-Routine Fracturing Plugging Back X Subsequent Report Water Shut-Off Casing Repair Conversion to Injection Altering Casing Final Abandonment Notice Other WEEKLY DRILLING SUMMARY Dispose Water 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.)* SEE ATTACHED WEEKLY REPORT OIL COM. DIV. 14. I hereby certify that the foregoing is true and correct 8-14-95 DRILLING SUPERINTENDENT (This space/for Federal or State office use) COEPTED FOR RECORD Title 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 statement

*See instruction on Reverse Side

INMUCO

FARMINGTON DISTRICT OFFICE