UNITED STATES DEPARTMENT OF THE INTERIOR CONSTRUCTION OF TH

Expires August (1 1965 LEASE DESIGNATION AND SERIAL

BUREAU OF LAND	MANAGEMENT
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NM 013654 SUNDRY NOTICES AND REPORTS ON WELLS IF INDIAN. ALLOTTEE OR TRIBE NAME Do not use this form for proposais to drill or to deepen or plug back to a different reservoir.

Use "APPLICATION FOR PERMIT" for such proposais.) T. UNIT AGRESHENT NAME OTHER RINCON UNIT NAME OF OPERATOR S. FARM OR LEASE NAME Union Oil Co. of California RINCON ADDRESS OF OPERATOR 9. WELL NO. P. O. Box 671, Midland, TX 79702 252 LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below)

At surface 10. FIELD AND POOL OR WILDCAT FRUITLAND COAL

1640' FNL & 1605' FEL

11. SEC., T., B., M., OE BLX. AND SURVEY OF AREA

14. PERMIT NO 15. ELEVATIONS (Show whether of, RT, GR, etc.)

and the control of the state of

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Sec. 18, 1-27-N. 12. COUNTY OR PARISH: 13. STATE

Rio Arriba

16

Check Appropriate Box To Indicare Nature of Notice, Report, or Other Data

6545' GL

TOTICE OF INTENTION TO:							
				1	SUBSEQUENT EX	PORT OF:	
TEST WATER SHUT-OFF	1	PULL OR ALTER CASING			<u> </u>	_	
FRACTURE TREAT	. ——;			WATER SHCT-OFF	 -	REPAIRING WELL	
	·——	MULTIPLE COMPLETE		FRACTURE TREAT	MENT	ALTERING CASING	
SHOUT OR ACIDIZE	:	ABANDON®		SHOOTING OR ACT	DIZING	<u>:</u>	-
REPAIR WELL		CHANGE PLANS	X	(Other)		TBYADON MEML.	<u>—</u> į
Others			:		DOST PRESIDE OF THE	tipie completion on Well	
ESCRIBE PROPOSED OR CO		0.000		- Completion	or Recompletion Re	tiple completion on Well	

OR COMPLETED OPERATIONS (Clearly State all pertinent details, and give pertinent dates, including estimated date of starting and if well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones perti-

Change 8-5/8" Surface Casing

From: 8-5/8" 24# K-55 ST&C

8-5/8" 20# X-42 ST&C To:

MAY2 9 1990

OIL CON. DIV. DIST. 3

(Pipe manufacturer specifications attached)

APPROVED

MAY 1 0 1990

AFKONTONICEEL

18. I hereby certify that the foregoing is true and correct	FOR	
SIGNED Sally H. Buyan (This space for Pederal or State office use)	TITLE Drilling Superintendent	DATE 5/2/90
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE

MMOCQ.

*See Instructions on Reverse Side