REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE

PULL OR ALTER CASING MULTIPLE COMPLETE

ABANDON Change Total Depth

REPAIR WELL

CHANGE ZONES

(other)

UNITED STATES DEPARTMENT OF THE INTERIOR **GEOLOGICAL SURVEY**

	5. LEASE SF 078430
	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
	医多种名 人名英格兰
	7. UNIT AGREEMENT NAME
	+ <u>1</u> 1, <u>4</u>
	8. FARM OR LEASE NAME
	Newsom "A" 588 & 888
	9. WELL NO. 2.10
	16 얼청군리 의 설치는
	10. FIELD OR WILDCAT NAME
	Undesignated Gallup
	11. SEC., T., R., M., OR BLK. AND SURVEY OR
,	AREA Sc. 10, T26N, R8W
	N.M.P.M. N. N. S.
	12. COUNTY OR PARISH 13. STATE
	San Juan New Mexico
_	14. API NO.
	I

15. ELEVATIONS (SHOW DF, KDB, AND WD)

SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a differen reservoir. Use Form 9–331–C for such proposals.)

gas 凶 well other well 2. NAME OF OPERATOR Union Texas Petroleum Corporation 3. ADDRESS OF OPERATOR P.O. Box 808, Farmington, New Mexico 87499 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 AT SURFACE: 1725 Ft/South; 990 Ft/ West Line AT TOP PROD. INTERVAL: Same as above AT TOTAL DEPTH: Same as above 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

SUBSEQUENT REPORT OF:

R E C (NOTE: Report results of multiple completion or zone change on Form 9-330.)

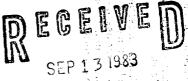
6942 R.K.B.

SEP 0.9 1983

BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREA

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.)*

We desire to change the total depth of this well from 6880' to 7130' in order to reach the base of the Greenhorn formation.



OIL CON. DIV.

	_	DIST. 3	
Subsurface Safety Valve: Manu. and Tyr	Qe	Set @	Ft.
18. I hereby certify that the foregoing is	True and correct		-
SIGNED Withhard R Herringt		DATE 9-6-83	
Triender N. Herrings	(This space for Federal or State office use)		_
APPROVED BY	TITLE	DATE	
		Sele 1 2 38,03 18 1	
	*See Instructions on Reverse Side	R. Brusham	
		Part 2006 PRANCER	

NMOCC