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

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

SHOOT OR ACIDIZE REPAIR WELL

PULL OR ALTER CASING MULTIPLE COMPLETE **CHANGE ZONES** 

Form 9–331 Dec. 1973	Form Approved. Budget Bureau No. 42-R14
UNITED STATES  DEPARTMENT OF THE INTERIOR  GEOLOGICAL SURVEY	5. LEASE SF-080724-A 6. IF INDIAN, ALLOTTIEE 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 Form 9–331–C for such proposals.)	7. UNIT AGREEMENT NAME
1. oil gas well other	8. FARM OR LEASE NAME Zachry 9. WELL NO.
2. NAME OF OPERATOR Union Texas Petroleum Corporation 3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME Armenta Gallup  11. SEC., T., R., M., OR BLK. AND SURVEY
P.O. Box 1290, Farmington, NM 87499  4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) AT SURFACE: 1725 f/South; 1745 f/West line AT TOP PROD. INTERVAL: same as above	AREA Sec. 10, T28N, R10W, NMPM  12. COUNTY OR PARISH 13. STATE San Juan New Mexico
AT TOTAL DEPTH: Same as above  16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	14. API NO.  15. ELEVATIONS (SHOW DF, KDB, AND W 5805 GR
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	3000 dK

RECEIVED
(NOTE: Report results of multiple completion or zone

SEP 23 1983 Change on Form 9-330.)

BUREAU OF LAND MANAGEMENT

FARMINGTON RESOURCE AREA ABANDON\* (other) reseeding and painting 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.)\*

On 9/13/83, reseeding was completed using BLM Seed Mix No. 2. The painting was completed using Brown Federal Standard No. 595a-30318. Pipeline and well pad.

OIL CON. DIV. DIST. 3

Subsurface Safety Valve: Manu. and Typ	e		Set @	Ft.
18. I hereby certify that the foregoing is	true and correct TITLE Area	Operations Manager	9/16/83	·
R.U/ MOLVO	(This space for Fede	ral or State office use)		
APPROVED BY	TITLE	DATE	·····	
CONDITIONS OF APPROVAL, IF ANY:			ACCEPTED	FOR RECORD

\*See Instructions on Reverse Side

SEP 27 1983

FARMINGTON RESOURCE AREA

, watere