UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

Subsurface Safety Valve: Manu. and Type

18. I hereby pertify that the foregoing

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY

	Budget Bureau No. 42-K1424
. [5. LEASE
	SF 047017-B
	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
	7. UNIT AGREEMENT NAME
rent	8. FARM OR LEASE NAME
	Angel Peak
	9. WELL NO.
	24
	10. FIELD OR WILDCAT NAME
	Wildcat Gallup
	11. SEC., T., R., M., OR BLK. AND SURVEY OR
17	AREA
1,	Sec. 12, T28N, R11W, N.M.P.M.
	12. COUNTY OR PARISH 13. STATE
	San Juan New Mexico
	14. API NO.
CE,	
	15 ELEVATIONS (SHOW DE, 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 differeservoir. Use Form 9-331-C for such proposals.) well 🛛 1. oil other well 2. NAME OF OPERATOR Union Texas Petroleum Corporation 3. ADDRESS OF OPERATOR P. O. Box 808, Farmington, NM 87499 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space AT SURFACE: 1750 ft./S; 1980 ft./W line AT TOP PROD. INTERVAL: Same as above Same as above AT TOTAL DEPTH: 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTI REPORT, OR OTHER DATA 574% R.K.B. SUBSEQUENT REPORT OF REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT GEOLOGICAL N. M. SHOOT OR ACIDIZE (NOTE: Report results of multiple completion or zone REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON* Circulated cement (other)

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.)*

19 bbl. of cement slurry were circulated to the surface on the second stage of the 7-5/8" cement job. This information was left off the Sundry Notice dated 1/4/83 that reported the setting and cementing of the 7-5/8" casing.

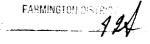
> Set @ ___ TITLE Area Prod. Supt. DATE 1/21/83

(This space for Federal or State office use)

TITLE

DATE - AGEST TOU FOR RESORD

*See Instructions on Reverse Side



JAN S - Taga



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