

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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.)

1. oil well ☒ gas well ☒ other

2. NAME OF OPERATOR

Union Texas Petroleum Corp.

3. ADDRESS OF OPERATOR

P. O. Box 808, Farmington, N.M. 87499

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 1680 ft./S; 850 ft./E 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

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
CHANGE ZONES ☐
ABANDON* ☐
(other) Ran 7" Liner

SUBSEQUENT REPORT OF:

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RECEIVED
JAN 10 1983

(NOTE: Report results of multiple completion or zone change on Form 9-330.)
U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

5. LEASE
SF 047017 B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Angel Peak "B"

9. WELL NO.
24-E

10. FIELD OR WILDCAT NAME

Basin Dakota; Wildcat Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 13, T28N, R11W, N.M.P.M.

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

14. API NO.

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

650 R.K.B.

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.)*

1. Drilled 8-1/2" hole with gas to total depth of 6576 ft. R.K.B.
2. Ran 196 ft. of 7", 23.00#, K-55 casing as a liner. Bottom of liner was set at 6569 ft. R.K.B. Top of liner was set at 5211 ft. R.K.B.
3. Cemented liner with 225 cu. ft. of 50-50 Poz with 2% gel, 18% salt, 0.5% CFR-2, 0.6% Halad 9. Plug down at 11:00 P.M. 1/5/83.

Subsurface Safety Valve: Manu. and Type

Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct

SIGNED

Kenneth E. Roddy
Kenneth E. Roddy

TITLE Area Prod. Supt. DATE 1/6/83

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

*See Instructions on Reverse Side

NMOCC

JAN 24 1983

FARMINGTON DISTRICT