UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

	Budget Bureau No. 42-R1424
ſ	5. LEASE
-	SF 077865
	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
	7. UNIT AGREEMENT NAME
ent	8. FARM OR LEASE NAME
	Albright
	9. WELL NO.
	2
	10. FIELD OR WILDCAT NAME
	Aztec Pictured Cliffs .
	11. SEC., T., R., M., OR BLK. AND SURVEY OR
17	Section 22, T29N-R10W NMPM
	12. COUNTY OR PARISH 13. STATE San Juan New Mexico
CE,	14. API NO.

SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a difference reservoir. Use Form 9–331–C for such proposals.) gas 1. oil W other well well 2. NAME OF OPERATOR Union Texas Petroleum Corporation 3. ADDRESS OF OPERATOR P.O. Box 1290, Farmington, New Mexico 87499 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space AT SURFACE: 990' FNL; 890' FWL AT TOP PROD. INTERVAL: Same as above AT TOTAL DEPTH: Same as above 16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTIC 15. ELEVATIONS (SHOW DF, KDB, AND WD) REPORT, OR OTHER DATA 5670' G.L. SUBSEQUENT REPORT OF: REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT [(NOTE Report Fully of multiple completion or zon SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE BUREAU OF LAND MANAGEMENT CHANGE ZONES FARMINGTON RESOURCE AREA ABANDON* (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.)* MIRUSU. Pull 1' tubing. Clean out to TD w/foam. 2. Refrac Pictured Cliffs w/80,000# sand in slick water. Clean out to TD, run production tubing, and recomplete as Pictured Cliffs producer. Set @ ... Subsurface Safety Valve: Manu. and Type ___ 18. I hereby certify that the foregoing is true and correct October 14, 1983 Petroleum Eng. SIGNED (This space for Federal or State office use)

DATE TITLE APPROVED BY CONDITIONS OF APPROVAL, IF ANY: ACCEPTED FOR RECORD

*See Instructions on Reverse Side

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