

**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 Corporation*

3. ADDRESS OF OPERATOR  
*P. O. Box 808, Farmington, New Mexico 87499*

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: *744' FSL & 1850' FEL*  
AT TOP PROD. INTERVAL:  
AT TOTAL DEPTH:

5. LEASE  
*SF 080724-A*

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
*Zachry*

9. WELL NO.  
*52*

10. FIELD OR WILDCAT NAME  
*Undesignated Gallup*

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
*Sec. 35, T-29N, R-10W, N.M.P.M.*

12. COUNTY OR PARISH *San Juan* 13. STATE *New Mexico*

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
*5763'*

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	<input type="checkbox"/>	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	<input type="checkbox"/>
<i>(other) Change access route to well pad</i>		

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

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.)\*

*It is necessary to change the access route to this new well due to topographical conditions along the previously proposed route on the 8" Main line right-of-way.*

*Specifically, two steep hills were not graded down sufficiently during pipeline construction to allow heavy equipment travel, and to do so now would jeopardize the new line just completed.*

*It is therefore proposed that the north end of lateral #160 North be used since that lateral as completed is more adaptable to heavy equipment travel and road construction than the previously proposed route.*

*No new ground will be disturbed and no new archaeological survey will be needed.*

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED *W. K. Cooper* TITLE *Field Operations Manager* DATE *March 7, 1983*

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_

DATE *APPROVED AS AMENDED*  
*APR 15 1983*  
*JAMES F. SIMS*  
DISTRICT ENGINEER

\*See Instructions on Reverse Side

ZACHRY SYSTEM

Previously proposed access

ZACHRY # 52

Presently proposed access

