

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 1290, Farmington, NM 87499

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 1862 F/South; 860 F/East 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) reseed ☐

SUBSEQUENT REPORT OF:

☐  
☐  
☐  
☐  
☐  
☐  
☐  
☐  
☐

5. LEASE  
SF 077865

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Albright

9. WELL NO.  
11

10. FIELD OR WILDCAT NAME  
Undesignated Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 22, T29N, R10W, NMPM

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

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
5614' GR

(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.)\*

On September 7, 1983, reseed was completed using BLM Seed Mix No. 2.  
The painting was completed using Brown Federal Standard No. 595a-30318.

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

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

SIGNED R.D. Motto TITLE Area Operations Manager DATE October 4, 1983

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

ACCEPTED FOR RECORD

OCT 17 1983

\*See Instructions on Reverse Side

NMOCC

FARMINGTON RESOURCE AREA

BY E.H.B.