UNITED STATES DEPARTMENT OF THE INTERIOR GEOLOGICAL SURVEY

_			 		
5.	LEA	ASE	 -		
	NM	03369			

/	6. IF INDIAN, ALLOTTEE OR TRIBE NAME			
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	7. UNIT AGREEMENT NAME			
(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.)	8. FARM OR LEASE NAME			
1. oil gas	Wilson			
well other	9. WELL NO.			
2. NAME OF OPERATOR	#3			
Union Texas Petroleum Corporation	10. FIELD OR WILDCAT NAME			
3. ADDRESS OF OPERATOR	Undesignated Gallup			
P. O. Box 808, Farmington, N.M. 87499	11. SEC., T., R., M., OR BLK. AND SURVEY OR			
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA			
below.)	Sec. 31, T-29N, R-10W, N.M.P.M.			
AT SURFACE: 374' FNL & 2271' FEL AT TOP PROD. INTERVAL: Same as above	12. COUNTY OR PARISH 13. STATE			
AT TOTAL DEPTH	San Juan New Mexico			
Same as above	14. API NO.			
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA				
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)			
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	5617' GR			
TEST WATER SHUT-OFF				
RACTURE TREAT	V/			
SHOOT OR ACIDIZE				
REPAIR WELL PULL OR ALTER CASING TO THE STATE OF THE	(NOTE: Report results of multiple completion or zone			
MULTIPLE COMPLETE	change on Form 9–330.)			
CHANGE ZONES	**************************************			
ABANDON*	TO COMMEY			
other) Change Proposed T.D.	. M. M.			
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is di measured and true vertical depths for all markers and zones pertinen. We propose to change the total depth of this in order to reach the base of the Greenhorn f	irectionally drilled, give subsurface locations and it to this work.)* Well from 5999 feet to 6250 feet			
All other procedures to remain the same.	·			
	WED TO SERVED			
	10 1983			
	OIL CON. DIV.			
Subsurface Safety Valve: Manu. and Type	Set @ Ft.			
18. I hereby certify that the foregoing is true and correct				
P. M. Pippin TITLE Sr. Petr. Eng	r. DATE July 14, 1983			
(This space for Federal or State office	ce use)			
APPROVED BY TITLE •	Frank Tolk Company of the Company of			
ONDITIONS OF APPROVAL, IF ANY:	DATE.			

*See Instructions on Reverse Side

NMOCC

A. Rifelal