

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42 R1424.

5. LEASE DESIGNATION AND SERIAL NO.

MOO-C-1420-1722

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Ute Mountain Ute

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal Ute 25

9. WELL NO.

#1

10. FIELD AND POOL, OR WILDCAT

Verde Gallup

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

SEC. 25-T31N-R15W

12. COUNTY OR PARISH 13. STATE

San Juan N.M.

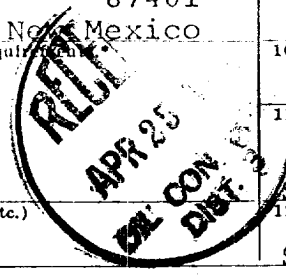
1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR Minerals Management Inc., Clinton Oil Co., Glenn A. Dow and T. Keith Marks

3. ADDRESS OF OPERATOR 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
501 Airport Dr. Farmington, New Mexico

900 FSL 2100FWL SEC. 25-T31N-R15W



14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

5460 DF

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF
FRACTURE TREAT
SHOOT OR ACIDIZE
REPAIR WELL
(Other)

PULL OR ALTER CASING
MULTIPLE COMPLETE
ABANDON*
CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF
FRACTURE TREATMENT
SHOOTING OR ACIDIZING
(Other)

REPAIRING WELL
ALTERING CASING
ABANDONMENT*

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

3-4-75 Perforated casing with one hole at 4330, 4331, 4332, 4348, 4349, 4356, 4358, 4360, 4378, 4380, 4382, 4384, 4386, 4404, 4406, 4408, 4410, 4436, 4438, 4442. Ran tubing and packer set at 4290. Acidize w/500 gallons 15% HCl w/600 SCF nitrogen. Breakdown 1700 psi, maximum pressure 2100 psi, average rate 2 1/2 BPM. Swab test. On 3-26-75 reperformate with 1 hole at 4376, 4378, 4380, 4382, 4384, 4386, 4388, 4390, 4392, 4394. On 4-2-75 Foam Frac with 50,000 gallons foam (700,000 SCF nitrogen-21000 gallons water) 8000 lb. 100 Mesh sand, 6000# 40-60 sand and 28,000# 20-40 sand. Maximum pressure 3500 spi, avg. pressure 2850 psi. Avg. rate 26 BPM (Foam)

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

SIGNED J. Arnold Swell

Area Manager
TITLE Minerals Management Inc. DATE 4-23-75

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: