	TE• Budget Bureau No. 1004-0135 Expires August 31, 1985
BUREAU OF LAND MANAGEMENT	5. LEABE DESIGNATION AND SERIAL NO. MOO-C-1420-4387
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 "APPLICATION FOR PERMIT—" for such proposals.)	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Ute Mtn. Ute
OIL CAR CAR OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	N/A
Wintershall Corporation 3. ADDRESS OF OPERATOR	8. FARM OR LEASE NAME Ute Mtn. Ute
5251 DTC Parkway Suito 500 Bull	9. WHILL NO.
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*  At surface	34-11 10. FIELD AND POOL, OR WILDCAT
	Basin Dakota
945' FNL & 1110' FWL (NWNW)	11. SEC., T., R., M., OR BIX AND
/	34-31N-14W
ADT# 2004 FOR TITLE 15. ELEVATIONS (Show whether of, RT, GR, etc.)	1
API#: 300458715500 5543' ungraded ground	12. COUNTY OR PARISH 13. STATE San Juan New Mey
Check Appropriate Box To Indicate Nature of Notice, Report, o	San Juan   New Mex
The state of the s	
TEST WATER SHUT-OFF PULL OR ALTER CARRYO	EQUENT REPORT OF:
FRACTURE TREAT  MULTIPLE COMPLETE  FRACTURE TREATMENT	PEPAIRING WELL
ABANDON*  SHOOTING OR ACIDIZING	ALTERING CASING
(Other)	ABANDONMENT*
(NOTE: Report resu	its of multiple completion on Well
7. DESCRIBE PROPUSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dat nent to this work.).	es, including estimated date of starting any
10/9/87 MIRU Completion rig. 10/10/87 Ran CBL & Press test csg to 3000 psi Wold ov	markers and zones perti-
10/12/87 Acidize Burro Canyon w/ 500 gal 15% ugg	·
-0/13/0/ Bwabbilly Salt Water	
10/17/87 Perforate Dakota w/ 15 holes @ 5559, 62', 65', 68', 5603', 13', 16', and 19'. Acidized with 1000 gals 1	72', 74', 78', 82', 84', 99' 5% HCL acid. Fractured with
10/18/87 - 10/27/87 Swab & flow back load fluid. 10/27/87 SI for pressure build up.	
	DEC 0 9 1987 CON. DIV.
	DEC DO 1000 (U)
71	108/
· <b>4</b>	DIST. 3
I hereby certify that the foregoing is true and correct	J
(This space for Federal or State office and	DATE 10/29/87

8. I hereby certify that the foregoing is true and correct			
(This space for Federal or State office use)	TITLE Operations Manager	DATE 10/29/87	
APPROVED BY	TITLE	DATE	
	OPERATOR'S COPY  *See Instructions on Reverse Side		