

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate
(Other instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

1. ☐ OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR
Union Texas Petroleum Corporation

3. ADDRESS OF OPERATOR
P. O. Box 1290, Farmington, New Mexico 87499

4. LOCATION OF WELL (Report location clearly and in accordance with State requirements.
See also space 17 below.)
At surface 800' FSL; 980' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
7123' GR

5. LEASE DESIGNATION AND SERIAL NO.
Contract No 153

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Jicarilla Apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Jicarilla J

9. WELL NO.
12E

10. FIELD AND POOL, OR WILDCAT
Blanco MV; Basin DK; Tapacito

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

12. COUNTY OR PARISH
Rio Arriba

13. STATE
New Mexico

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

X

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.)

It is proposed to remove the retrievable dual packer which isolates the Mesaverde and Dakota in the above captioned well and perforate the Gallup interval 6333'-6718' w/27 holes. It is then planned to acidize and fracture stimulate the Gallup with gelled water and sand. The well will then be returned to production as a single commingled completion as per NMOCD Order R-7507.

A Well Completion Report (Form 3160-4, formerly 9-330) is required when this operation is completed.

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

SIGNED

M. R. Herrington

TITLE Petroleum Engineer

DATE

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

M. MILLENBAUGH
AREA MANAGER

*See Instructions on Reverse Side

NMOCD