

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse 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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. Contract 107	
2. NAME OF OPERATOR Union Texas Petroleum Corp.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache	
3. ADDRESS OF OPERATOR P.O. Box 2120 Houston, TX 77252-2120		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1850 FSL & 1520 FWL		8. FARM OR LEASE NAME Jicarilla "F"	
14. PERMIT NO.		9. WELL NO. 7	
15. ELEVATIONS (Show whether SP, RT, GR, etc.) 4262 RKB		10. FIELD AND POOL, OR WILDCAT Blanco (MV)	
		11. SEC., T., R., M., OR NE. AND SURVEY OR AREA 28-BBN-4N	
		12. COUNTY OR PARISH Rio Arriba	
		13. STATE NM	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PCCL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input checked="" type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>

(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.)\*

Plug Dakota & place Mesaverde on pump.

4-27-90 - RIH w/5½" cmt ret set @ 7400'. Pump 100 sx class "B" cmt & sqz 5½ csg w/11.5 BBL cmt in Dakota Formation.

4-28-90 - RIH 2 3/8 tbg to 6173.89', pump @ 6136.64, and anchor @ 5479.74' Place MV on pump.

RECEIVED  
JUN 8 1990  
OIL CON. DIV.  
DIST. 3

RECEIVED  
JUN 11 1990  
OIL CON. DIV.  
DIST. 3

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

SIGNED <u>[Signature]</u>	TITLE <u>Reg. Permit Coord.</u>	DATE <u>5/24/90</u>
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(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ ACCEPTED FOR RECORD

CONDITIONS OF APPROVAL, IF ANY:

ENCLOSURE

MAY 30 1990

\*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

BY [Signature]