Form 3160-5 (ovember 1983) (ormerly 9-331)	UNITED STA DEPARTMENT OF TH BUREAU OF LAND MA	E INTERIO	SUBMIT IN TRIPLICATE? (Other instructions on reverse side)	Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL NO. Contract No. 150	
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.)				Jicarilla Apache	
OIL CAS		•		7. UNIT AGREEMENT NAME	
WELL WELL 2. NAME OF OPERATOR	X OTHER			8. FARM OR LEASE NAME	
Union Texas Petroleum Corporation 3. ADDRESS OF OPERATOR				Jicarilla "G" 9. WELL NO.	
P.O. Box 1	290, Farmington, NM 8 Report location clearly and in accord	7499	ate requirements.	8-E 10. FIELD AND POOL, OR WILDCAT	
See also space 17 be At surface	low.)		ECETVED	Basin DK BS Mesa/Gallup	
1710' FSL;	1810 FEL		APP 02 1384 .	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
			AU OF LAND MARAGEMEN		
14. PERMIT NO.	15. ELEVATIONS (S	GR	(, or, etc.)	Rio Arriba New Mexico	
16.	Check Appropriate Box T	o Indicate Nat	ure of Notice, Report, or (Other Data	
	NOTICE OF INTENTION TO:		8086#Q	CENT REPORT OF:	
TEST WATER SHUT-	· ·		WATER SHUT-OFF	REPAIRING WELL	
FRACTURE TREAT	MULTIPLE COMPLETI		FEACTURE TREATMENT SECOTING OR ACIDIZING	ALTERING CASING ABANDONMENT®	
REPAIR WELL (Other) CONNE	CHANGE PLANS		(Other) (Nots: Report result	s of multiple completion on Well piction Report and Log form.)	
	.01	ate all pertinent	detail: and also postinent dates	s, including estimated date of starting any cal depths for all markers and somes terti-	
showing th	nal APD was filed on Ma ne well was in a non-st er was incorrect and th	candard loc	ation.		
		·			
		was Just 712 a			
		Dist. 3			
10 19 20 1 1 20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	the foregoing is true and correct				
SIGNED LEG	Ly Da Molla III	TITLE _Are	a Operations Manage	r DATE <u>March 29, 1984</u>	
This stace for Fy	ederal or State office use)		ACCEPTED FOR RECORD		
APPROVED BY _ CONTITIONS OF	APPROVAL, IF ANY:	TITLE		JUN 0 5 1984	
			FA FA	KWINGTON NESCONGE AREA	
	* \$	ee Instructions	on Reverse Side	Smr	

willfully to make to any department or agency of the