

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0138
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
Jicarilla Contract 107
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Jicarilla Apache

7. UNIT AGREEMENT NAME
N/A

8. FARM OR LEASE NAME
JICARILLA F

9. WELL NO.
5A

10. FIELD AND POOL, OR WILDCAT
Blanco Mesaverde
West Lindrith Gal-Dk

11. SEC., T., R., E., OR BLK. AND SURVEY OR AREA
Section 33-T26N-R4W

12. COUNTY OR PARISH | 13. STATE
Rio Arriba | NM

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

3. ADDRESS OF OPERATOR
375 U.S. Highway 64, Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface

1985' FSL & 1100' FWL

14. PERMIT NO. | 15. ELEVATIONS (Show whether DF, RT, CR, etc.)
| 6811' G.L.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <u>Spud and Surface Casing</u> <input checked="" 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 and 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.)*

Union Texas Petroleum wishes to advise that this well was spud at 4:00 PM on 7/28/87. A 12-1/4" hole was drilled to 360' KB. Run 9-5/8", 36#, K-55 casing to 357' KB, cementing to surface with 300 sx (354 cu.ft.) C1 "B" with 2% CaCl2 and 1/4# flocele/sk. Circulate 15 bbls (84 cu.ft.) to surface. Nipple up BOP and manifold, testing to 1000 psi. Held OK. Test casing to 600 psi. Held OK. Drill 8-3/4" hole out of surface.

RECEIVED
 BUREAU OF LAND MANAGEMENT
 07 AUG -7 PM 8:55
 FARMINGTON RESOURCE AREA
 FEDERAL BUREAU OF REVENUE

RECEIVED
 AUG 13 1987
 OIL & GAS DIV.
 DIST. 9

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

SIGNED Robert C. Frank

TITLE Permit Coordinator ACCEPTED FOR RECORD 1987

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____ DATE AUG 11 1987

FARMINGTON RESOURCE AREA
BY Smm

*See Instructions on Reverse Side

NMOOG