

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved,
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"/>	2. NAME OF OPERATOR Union Texas Petroleum	3. ADDRESS OF OPERATOR 375 US Highway 64, Farmington, NM 87401	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1240' FSL & 710' FEL	5. LEASE DESIGNATION AND SERIAL NO. Jic. 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. 9	10. FIELD AND POOL, OR WILDCAT Blanco NW/ West Lindrith Gal/DK	11. SEC., T., S., M., OR BLK. AND SURVEY OR AREA Sec. 28, T26N-R4W	12. COUNTY OR PARISH Rio Arriba	13. STATE NM
14. PERMIT NO.	15. ELEVATIONS (Show whether OF, ST, OR, etc.)											

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"/>	PULL OR ALTER CASING	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input 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 PLANS	<input type="checkbox"/>	(Other) Int. casing and prod. liner	<input checked="" 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.)*

1. Drill 8-3/4" hole to 3960'.
2. Run 7", 23#, N-80 intermediate casing to 3960'.
3. Cement with 250 sx (643 cu.ft.) 65/35 POZ with 12% gel and 12-1/4# gilsonite/sk, tailed by 100 sx (118 cu.ft.) Cl "B" containing 2% CaCl2. Lost circulation. Cement top at 3650' by temperature survey.
4. Test BOP and manifold to 1500 psi. Test casing to 1500 psi. All held OK.
5. Drill 6-1/4" hole with gas to 8145'.
6. Log well.
7. Run 4-1/2", 11.6# liner from 3766'-8145'.
8. Cement with 600 sx (942 cu.ft.) 50/50 POZ containing 4% gel, 6-1/4# gilsonite/sk and 10# salt/sk. Cement top to be determined by bond log.
9. Rig down, move off.

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

SIGNED

Robert C. Frank

TITLE Permit Coordinator

DATE 10/19/88

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

NOV 14 1988

FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side